



3801 West Chester Pike
Newtown Square, Pennsylvania 19073-2387
Telephone: 610.359.2000

March 22, 2000

CERTIFIED MAIL (Z 533 684 328)

Mr. Benjamin L. Williams
Pennsylvania Department of Environmental Protection
Southeast Regional Office
Waste Management Program
Lee Park, Suite 6010
555 North Lane
Conshohocken, PA 19428-2233

**Re: Multiple EPA Identification Numbers at Atlantic Richfield Company Site
3801 West Chester Pike, Newtown Square, PA 19073
Lyondell Chemical Company (EPA ID No. PAD046538211)**

Dear Mr. Williams:

We are notifying you that Lyondell Chemical Company ("Lyondell") is selling its Polyols Business, pending final approvals, to Bayer Corporation ("Bayer") effective approximately April 1, 2000. As a result of this sale, Bayer will own Lyondell's polyol technology operations at the Research and Development (R&D) Facility located in Newtown Square, PA. Although the site is currently owned by Atlantic Richfield Company, it will be leased by both Lyondell and Bayer, and each company individually will be a large quantity generator of hazardous waste. Please note that, with regard to Lyondell, this notification is for informational purposes only, and does not require accompanying submittal of a revised EPA Form 8700-12. However, as Bayer is a distinct entity (or "person" per the definition of generator at 40 CFR 260.10 and incorporated by reference in 25 Pa. Code 260a.10), we understand that Bayer will require its own EPA Identification Number (EPA ID#). We understand this to be the case notwithstanding the fact that two EPA ID#s will subsequently be assigned to the single subject site. Bayer is in the process of obtaining its own EPA ID# from EPA Region III and plans to have it in place on the effective date of the sale. As a result, as of April 1, 2000 two EPA ID#s will be in place for the subject site.

We are also notifying you that, as part of the expected lease arrangements and general services agreement between Lyondell and Bayer, there will be portions of the site shared by both companies and services potentially provided by Lyondell for Bayer. With regard to hazardous waste, Lyondell and Bayer will share the on-site less than ninety day accumulation area with each company's waste being clearly identified. Lyondell, as host, will provide shared services to Bayer which are expected to include collection of Bayer generated waste, movement of Bayer generated

Mr. Benjamin L. Williams
PAD046538211
March 22, 2000
Page 2

hazardous waste to the less than ninety day accumulation area, and arrangement of off-site treatment, storage and disposal of Bayer generated waste. We understand that this arrangement, which is strictly for efficiency purposes, will not elevate either Lyondell or Bayer from generators to owners or operators of hazardous waste treatment, storage and disposal facilities. Accordingly, Lyondell and Bayer will conduct their hazardous waste operations in accordance with 40 CFR 262 and 25 Pa. Code 262a without the need for any hazardous waste permit.

Finally, each company will be responsible for complying with Federal and Pennsylvania hazardous waste regulations (in addition to all other regulations) applicable to their individual operations. As the operations transition, and where appropriate when the transition is complete, Lyondell and Bayer will jointly operate under existing preparedness, prevention and contingency plans, source reduction strategies, etc. that are presently in place for the site.

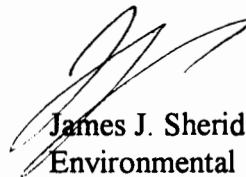
If you have any questions, please call me at (610) 359-4849.

Sincerely,



Thomas P. Baker
Environmental Superintendent
Lyondell Chemical Company

Endorsed By:



James J. Sheridan
Environmental Specialist
Bayer Corporation

cc: Mr. Grant Dufficy
U.S. Environmental Protection Agency, Region III
RCRA Programs Branch (3WC31)
1650 Arch St.
Philadelphia, PA 19103-2029

Ms. Jennifer Collins
U.S. Environmental Protection Agency, Region III
RCRA Programs Branch
Pennsylvania Section (3WC11)
1650 Arch St.
Philadelphia, PA 19103-2029

HS&E Central File

ARCO Chemical Company

3801 West Chester Pike
Newtown Square, Pennsylvania 19073-2387
Telephone 610 359 2000



RECEIVED
PA/DC 01/20/97

July 24, 1997

EPA 11-111-111

U.S. EPA Region III
RCRA Programs Branch
Pennsylvania Section (3HW51)
841 Chestnut Building
Philadelphia, PA 19107

Re: Modification of Notification of Regulated Waste Activity
ARCO Chemical Company
3801 West Chester Pike
Newtown Square, PA 19073
EPA ID No. PAD046538211

To whom it may concern:

Attached is an updated Notification of Regulated Waste Activity (EPA 8700-12) for the hazardous waste activities at the Newtown Square facility of ARCO Chemical Company (ACC). The waste codes typically generated by the facility are listed.

ACC is a Research & Development facility and no commercial manufacturing operations are located at this site. Pilot plants and research laboratory operations are the source of the chemical wastes.

Should you have any questions about the information submitted in this report, please contact me at (610) 359-4604.

Sincerely,

Rita M. Sammons
Environmental Superintendent

Enclosure

cc: Pennsylvania Department of Environmental Protection
Bureau of Land Recycling and Waste Management
Waste Management Program
16th Floor, Rachel Carson State Office Building
PO Box 2063
Harrisburg, PA 17105-2063

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Please refer to the instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☐ A. First Notification

☒ B. Subsequent Notification
(Complete Item C)

C. Installation's EPA ID Number
PAAD046538211

II. Name of Installation (Include company and specific site name)

ARCOCHEMICALCOMPANYR&D

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street
3801WESTCHESTERPIKE

Street (Continued)

City or TownStateZip Code
NEWTOWN SQUAREPA19073-2387County CodeCounty Name
DELAWARE

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box
SAME

City or TownStateZip Code

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)(First)
SAMMONSRIITAJob TitlePhone Number (Area Code and Number)
ENV SUPT610-359-4604

VI. Installation Contact Address (See Instructions)

A. Contract Address
Location Mailing Other
☒ ☒ ☐

B. Street or P.O. Box

City or TownStateZip Code

VII. Ownership (See Instructions)

A. Name of installation's Legal Owner
ARCOStreet, P.O. Box, or Route Number
1055FLOWERSTREETCity or TownStateZip Code
LOS ANGELES CA90071-Phone Number (Area Code and Number)B. Land TypeC. Owner TypeD. Change of Owner Indicator (Date Changed)
213-486-3511PYPYes☒ No☐MonthDayYear

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes; Refer to Instructions)

A. Hazardous Waste Activity

1. Generator (See Instructions)
☒ a. Greater than 1000kg/mo (2,200 lbs.)
☐ b. 100 to 1000 kg/mo (200-2,200 lbs.)
☐ c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1-5 below)
☐ a. For own waste only
☐ b. For commercial purposes
- Mode of Transportation
☐ 1. Air
☐ 2. Rail
☐ 3. Highway
☐ 4. Water
☐ 5. Other - specify _____
3. Treater, Storer, Disposer (at Installation) Note: A permit is required for this activity; see Instructions.
☐ 4. Hazardous Waste Fuel
☐ a. Generator Marketing to Burner
☐ b. Other Marketers
☐ c. Boiler and/or Industrial Furnace
☐ 1. Smelter Deferral
☐ 2. Small Quantity Exemption
 Indicate Type of Combustion Device(s)
☐ 1. Utility Boiler
☐ 2. Industrial Boiler
☐ 3. Industrial Furnace
☐ 5. Underground Injection Control

B. Used Oil Recycling Activities

1. Used Oil Fuel Marketer
☐ a. Marketer Directs Shipment of Used Oil to Off-Specification Burner
☐ b. Marketer Who First Claims the Used Oil Meets the Specifications
2. Used Oil Burner - Indicate Type(s) of Combustion Device(s)
☐ a. Utility Boiler
☐ b. Industrial Boiler
☐ c. Industrial Furnace
3. Used Oil Transporter - Indicate Type(s) of Activity(ies)
☐ a. Transporter
☐ b. Transfer Facility
4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)
☐ a. Process
☐ b. Re-refine

IX. Description of Hazardous Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001) ☒ 2. Corrosive (D002) ☒ 3. Reactive (D003) ☒ 4. Toxicity Characteristic (List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))
☒ ☒ ☒ ☒ D 0 0 4 D 0 0 5 D 0 0 6 D 0 0 7

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
F 0 0 1	F 0 0 2	F 0 0 3	F 0 0 4	F 0 0 5	F 0 2 7
7	8	9	10	11	12
D 0 0 8	D 0 0 9	D 0 1 0	D 0 1 1	D 0 2 2	D 0 2 9

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number; See instructions.)

1	2	3	4	5	6
X 8 5 0	X 9 0 0	X 9 1 0	X 9 4 0	X 9 1 8	6 6 6 6

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature

Charles W. Ruoff

Name and Official Title (Type or print)

Charles W. Ruoff
Facility Manager

Date Signed

7/24/97

XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)

RECEIVED

Form Approved, OMB No. 2030-0028 Expires 9-30-96
GSA No. 0248-EPA-07

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

ID - For Official Use Only

IX. Description of Regulated Wastes (Additional Sheet)

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; Use this page only if you need to list more than 12 waste codes.)

13 D 0 3 9	14 I D 7 2	15 N 8 9 9	16 P 0 0 3	17 P 0 0 5	18 P 0 1 1
19 P 0 1 2	20 P 0 1 4	21 P 0 2 4	22 P 0 2 8	23 P 0 3 0	24 P 0 4 7
25 P 0 4 8	26 P 0 6 8	27 P 0 6 9	28 P 0 7 5	29 P 0 7 7	30 P 0 8 7
31 P 0 9 8	32 P 1 0 4	33 P 1 0 5	34 P 1 0 6	35 P 1 0 8	36 P 1 1 3
37 P 1 1 9	38 P 1 2 0	39 P 2 0 5	40 U 0 0 1	41 U 0 0 6	42 U 0 0 7
43 U 0 0 8	44 U 0 0 9	45 U 0 1 2	46 U 0 4 1	47 U 0 5 2	48 U 0 5 3
49 U 0 6 8	50 U 0 6 9	51 U 0 8 0	52 U 0 9 2	53 U 0 9 6	54 U 1 0 1
55 U 1 0 2	56 U 1 0 3	57 U 1 0 5	58 U 1 0 6	59 U 1 0 7	60 U 1 0 8
61 U 1 1 2	62 U 1 1 3	63 U 1 1 7	64 U 1 2 1	65 U 1 2 2	66 U 1 2 3
67 U 1 3 3	68 U 1 3 4	69 U 1 4 4	70 U 1 3 8	71 U 1 4 7	72 U 1 5 1
73 U 1 5 2	74 U 1 5 6	75 U 1 6 0	76 U 1 6 2	77 U 1 6 5	78 U 1 6 9
79 U 1 8 8	80 U 1 9 0	81 U 1 9 8	82 U 2 0 9	83 U 2 1 3	84 U 2 1 4
85 U 2 1 6	86 U 2 1 7	87 U 2 2 1	88 U 2 2 2	89 U 2 2 3	90 U 2 2 8
91 U 2 3 8	92 U 2 4 6	93 U 3 5 3	94 U 4 0 4	95 7 7 7 7	96
97 	98 	99 	100 	101 	102
103 	104 	105 	106 	107 	108
109 	110 	111 	112 	113 	114
115 	116 	117 	118 	119 	120

RCRAInfo CM&E EVALUATION – VIOLATION FORM

*EPA ID Number		PAD046538211		EIN			
Handler Name		LYONDELL CHEMICAL COMPANY					
Street	3801 WEST CHESTER PIKE						
City	NEWTOWN SQUARE	State	PA	Zip Code	19073		
Actual Generator Status <i>Check only if different from Notified Status.</i>		LQG <input type="checkbox"/> SQG <input type="checkbox"/> CESQG <input type="checkbox"/> Closed <input type="checkbox"/> Non-Handler <input type="checkbox"/>					
Universe Change Required? <i>(Generator Status Change Required)</i>		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> If YES, complete the Universe Change Section (on reverse side of this form).					
RCRA Non-Notifier?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> If YES, complete the Handler Section (on reverse side of this form).					
Other Facility Information Changes?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> If YES, complete the Handler Section (on reverse side of this form).					
*EVALUATION		<input checked="" type="checkbox"/> Add		<input type="checkbox"/> Update		<input type="checkbox"/> Delete	
<i>You must provide an Evaluation Identifier (also known as the Sequence Number).</i>							
*Evaluation Identifier	*Type	*Evaluation Start Date (mm/dd/yyyy)		*Agency	Responsible Person	Suborganization	
	CEI	11/06/2007		S	JMO	WM	
Day Zero (mm/dd/yyyy): <i>You need to specify Day Zero for all evaluation types except CDI, CSE, FUI, SNY, and SNN, otherwise it defaults to Evaluation Start Date. For CDI, CSE, FUI, and SNY evaluations, you must select a previous CEI Start Date for the Day Zero. SNN evaluation type does not require a Day Zero.</i>				11/16/07		Reclassified SV Date: <i>Only applicable for SNY evaluation type as appropriate.</i>	
Notes: VIOLATIONS NOTED AND IMMEDIATELY CORRECTED							
Evaluation Indicator Field (Check all that apply) <input type="checkbox"/> Citizen Complaint <input type="checkbox"/> Multimedia Inspection <input type="checkbox"/> Sampling <input type="checkbox"/> Not Subtitle C							
Focused Coverage Areas (Use Only for Evaluation Type FCI) <i>Regulation-Specific FCI</i> BIF <input type="checkbox"/> CCI <input type="checkbox"/> CFI <input type="checkbox"/> INC <input type="checkbox"/> LDR <input type="checkbox"/> PTB <input type="checkbox"/> PTX <input type="checkbox"/> THI <input type="checkbox"/> UIC <input type="checkbox"/> UOI <input type="checkbox"/> UWR <input type="checkbox"/> OTHER (specify): _____ <i>Routine/Standardized FCI</i> CAR <input type="checkbox"/> CPC <input type="checkbox"/> DOS <input type="checkbox"/> EMR <input type="checkbox"/> IEI <input type="checkbox"/> ISI <input type="checkbox"/> RTI <input type="checkbox"/>							
Does this Evaluation Add/Update/Delete a Violation?		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		<i>If Yes, fill in the Violations Section(s) on page 2 of this form.</i>			
Does this Evaluation link to a Commitment?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		<i>If Yes, please use the RCRAInfo 3007 Information Requests and Commitments Form.</i>			
Does this Evaluation link to a 3007 Request?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		<i>If Yes, please use the RCRAInfo 3007 Information Requests and Commitments Form.</i>			
OUTSTANDING VIOLATIONS COVERED BY ABOVE EVALUATION? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> <i>If Yes, fill in information below.</i>							
*Seq. No.	*Violation Type	*Agency	*Regulation Citation (Type + Citation) (ex. FR 262.1)			*Date Determined (mm/dd/yyyy)	

*Required Fields

EPA ID Number				Handler Name			
PAD046583211				LYONDELL CHEMICAL COMPANY			
VIOLATIONS SECTION (Additional Violations can be added/updated/deleted using the RCRAInfo CM&E Additional Violations Form)							
VIOLATION <input checked="" type="checkbox"/> Add <input type="checkbox"/> Update <input type="checkbox"/> Delete						Link to Above Evaluation <input checked="" type="checkbox"/>	
Seq. No	Violation Type	Agency	Determined Date (mm/dd/yyyy)	Return to Compliance (RTC) Qualifier		Actual RTC Date (mm/dd/yyyy)	
<div style="border: 1px solid black; width: 50px; height: 20px;"></div>	<div style="border: 1px solid black; width: 50px; height: 20px; text-align: center;">262 C</div>	<div style="border: 1px solid black; width: 50px; height: 20px; text-align: center;">S</div>	<div style="border: 1px solid black; width: 50px; height: 20px; text-align: center;">11/6/2007</div>	<div style="border: 1px solid black; width: 50px; height: 20px; text-align: center;">O</div> A RTC Qualifier is required if entering an Actual RTC Date.		<div style="border: 1px solid black; width: 50px; height: 20px; text-align: center;">11/6/2007</div>	
Notes: _____							
LINK CITATIONS TO ABOVE VIOLATION?				YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		If Yes, fill in information below	
Citation Type		Citation		Citation Type		Citation	
<div style="border: 1px solid black; width: 50px; height: 20px; text-align: center;">FR</div>		<div style="border: 1px solid black; width: 150px; height: 20px; text-align: center;">262.34(a)(3)</div>		<div style="border: 1px solid black; width: 50px; height: 20px;"></div>		<div style="border: 1px solid black; width: 150px; height: 20px;"></div>	
<div style="border: 1px solid black; width: 50px; height: 20px;"></div>		<div style="border: 1px solid black; width: 150px; height: 20px;"></div>		<div style="border: 1px solid black; width: 50px; height: 20px;"></div>		<div style="border: 1px solid black; width: 150px; height: 20px;"></div>	
VIOLATION <input checked="" type="checkbox"/> Add <input type="checkbox"/> Update <input type="checkbox"/> Delete						Link to Above Evaluation <input checked="" type="checkbox"/>	
Seq. No	Violation Type	Agency	Determined Date (mm/dd/yyyy)	Return to Compliance (RTC) Qualifier		Actual RTC Date (mm/dd/yyyy)	
<div style="border: 1px solid black; width: 50px; height: 20px;"></div>	<div style="border: 1px solid black; width: 50px; height: 20px; text-align: center;">265 I</div>	<div style="border: 1px solid black; width: 50px; height: 20px; text-align: center;">S</div>	<div style="border: 1px solid black; width: 50px; height: 20px; text-align: center;">11/6/2007</div>	<div style="border: 1px solid black; width: 50px; height: 20px; text-align: center;">O</div> A RTC Qualifier is required if entering an Actual RTC Date.		<div style="border: 1px solid black; width: 50px; height: 20px; text-align: center;">11/6/2007</div>	
Notes: _____							
LINK CITATIONS TO ABOVE VIOLATION?				YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		If Yes, fill in information below	
Citation Type		Citation		Citation Type		Citation	
<div style="border: 1px solid black; width: 50px; height: 20px; text-align: center;">FR</div>		<div style="border: 1px solid black; width: 150px; height: 20px; text-align: center;">265.173(a)</div>		<div style="border: 1px solid black; width: 50px; height: 20px;"></div>		<div style="border: 1px solid black; width: 150px; height: 20px;"></div>	
<div style="border: 1px solid black; width: 50px; height: 20px;"></div>		<div style="border: 1px solid black; width: 150px; height: 20px;"></div>		<div style="border: 1px solid black; width: 50px; height: 20px;"></div>		<div style="border: 1px solid black; width: 150px; height: 20px;"></div>	
HANDLER SECTION (Fill out if RCRA Non-Notifier)							
Handler Name		Contact					
Street							
City		State		Zip Code			
County							
UNIVERSE CHANGE SECTION (Fill out if Universe Change Required)							
i. Indicate the Facility's current Universe(s):							
ii. Indicate the new RCRAInfo Generator Universe: <small>Note: All TSD activity changes must be handled by the IOR and cannot be made using this form.</small>				LQG <input type="checkbox"/> SQG <input type="checkbox"/> CEG <input type="checkbox"/> Non-Handler <input type="checkbox"/> Closed <input type="checkbox"/>			
iii. Indicate the new transporter status: (Only fill out if the facility requires a transporter status change)				Transporter <input type="checkbox"/> <small>If the transporter box is checked, you must check at least one mode of transportation below:</small> <input type="checkbox"/> Air <input type="checkbox"/> Water <input type="checkbox"/> Rail <input type="checkbox"/> Other <input type="checkbox"/> Highway		Non-Transporter <input type="checkbox"/> Check non-transporter if the facility is currently listed in RCRAInfo as a transporter AND no longer transports hazardous waste.	

*Required Fields



HAZARDOUS WASTE INSPECTION REPORT

☒ **GENERATOR**

 ☐ **S Q GENERATOR**

Company name Lyondell Chemical Company

EPA I.D. Number PAD046538211 Employer I.D. Number (EIN) _____

Site Address 3801 West Chester Pike-Newtown Square, PA 19073

County Delaware Municipality Newtown Township Zip 19073

Name of Inspector Jason Oseredzuk

Name & Title of Responsible Official Mr. Thomas Baker-Principal Environmental Engineer

Person Interviewed SAA Telephone (610) 359-2432

Mailing Address (if different from above) _____

Amount of Hazardous Waste Generated per Month: > 2,000 Pounds _____ Kgs _____

1. Site Characterization:

STORAGE: ☒ Container ☒ Tanks ☐ Containment Bldg. ☐ Drip Pad Other _____

PBR: ☐ Neutralization/WWTP ☐ Reclaim Other _____

GENERATOR TREATMENT ☐ Containers ☐ Tanks ☐ Containment Bldg. ☐ Drip Pad

2. Universal Waste: ☐ Large Quantity Handler ☒ Small Quantity Handler

Universal Waste Types Flourescent lamps, batteries

3. Hazardous Waste Transporters:

Transporter Name Veolia ES Technical Solutions License Number PA-AH 0500

Transporter Name Dart Trucking Company, Inc. License Number PA-AH 0219

Transporter Name Environmental Transport Group, Inc. License Number (NJ) 7107

4. Types of hazardous waste generated and destination facility (location & type).

SEE 2005 HAZARDOUS WASTE BIENNIAL REPORT FOR FULL DETAILS

Waste Code	Waste Description	Destination Facility
D001	Waste Flammable Liquids (propylene-oxide, methanol)	Veolia ES Technical Solutions OHD093945293
F003,D001	Waste Flammable Liquids (methanol)	Veolia ES Technical Solutions OHD093945293
F003,D001	Waste Flammable Liquids (acetone, isopropanol)	Veolia ES Technical Solutions OHD093945293
D001,F003,F005	Waste Flammable Liquids; Toxic (acetone, chloroform)	Veolia ES Technical Solutions OHD093945293
D001	Waste Oxidizing Liquid	Veolia ES Technical Solutions NJD980536593
D001	Waste Corrosive Liquid; flammable	Veolia ES Technical Solutions NJD980536593
F003,F005,D001	Waste Toxic Liquid (allyl alcohol, acetone)	Veolia ES Technical Solutions NJD980536593
D001	Waste Aerosols; Flammable (petroleum hydrocarbons)	Veolia ES Technical Solutions TXD000838896

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WASTE MANAGEMENT

HAZARDOUS WASTE INSPECTION REPORT GENERATORS -- SMALL QUANTITY GENERATORS

Site Name Lyondell Chemical Company ID Number PAD046538211 Date 11/06/2007

1 - No Violation Observed 2 - Not Applicable 3 - Not Determined 4 - Non Compliance

STATUS

1	2	3	4	REQUIREMENT	PA CIT. 25 PA Code	FED. CIT. 40 CFR	LINE NO.
X				Hazardous waste determination performed on all waste streams	262a.10	262.11	H001
X				Identification Number	262a.10	262.12	H002
X				Authorized transporters only	262a.10	262.12(c)	H003
X				Subsequent notification requirements met	262a.12(b)		H004
X				Proper manifest used	262a.10	262.21	H005
X				Manifests filled out correctly and completely	262a.20		H006
X				Manifests signed and routed properly	262a.23(a)	262.23	H007
X				Generator waste accumulated on site for 90 days or less	262a.10	262.34(a)	H008
	X			SQG waste accumulated on site for 180 days max unless 200 mile distance rule applies - 270 days	262a.10	262.34(e)(f)	H009
	X			SQG waste accumulated on-site never exceeds 6000 kg	262a.10	262.34(e)(f)	H010
X				Satellite accumulation requirements complied with	262a.10	262.34(c)	H011
X				Personnel training program per 265.16 complied with	262a.10	262.34(a)(4) 262.34(d)	H012
X				Manifest exception and biennial reports retained for 3 years	262a.10	262.40(a)(b)	H013
X				Specified records retained for three years	262a.10	262.40(c)	H014
X				Biennial reports submitted to the Department (LQG only)	262a.41	262.41	H015
X				Exception reporting procedures followed	262a.42	262.42	H016
X				Spill reporting procedures followed	262a.10	262.34(d)	H017
X				PPC plan developed and implemented	262a.10	262.34(a)	H018
X				Special requirements followed for international shipments	262a.10	262.50 262.60	H019
X				Source reduction strategy prepared and available (LQG only)	262a.100		H020
X				Excluded waste complies with exclusionary requirements	261a.4	261.4	H021

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WASTE MANAGEMENT

HAZARDOUS WASTE INSPECTION REPORT GENERATORS -- SMALL QUANTITY GENERATORS FACILITY SPECIFICS

Site Name Lyondell Chemical Company ID Number PAD046538211 Date 11/06/2007

1 - No Violation Observed 2 - Not Applicable 3 - Not Determined 4 - Non Compliance

STATUS

1	2	3	4	REQUIREMENT	PA CIT. 25 PA Code	FED CIT. 40 CFR	LINE NO.
				CONTAINERS (Subchapter I)			
			X	Containers managed in compliance with 40 CFR Part 265 Subpart I and 25 PA Code Chapter 265a Subchapter I	262a.10	262.34	H025
X				Containers of hazardous waste in good condition	265a.1	265.171	H026
X				Containers and stored waste compatible	265a.1	265.172	H027
			X	Containers kept closed except during addition or removal of wastes	265a.1	265.173(a)	H028
X				Containers managed to prevent leaks	265a.1	265.173(b)	H029
X				Container configuration and spacing insures safe management and access for inspection purposes and emergency equipment	265a.173		H030
X				Container storage areas inspected at least weekly	265a.1	265.174	H031
X				Special requirements for ignitable or reactive and incompatible waste complied with	265a.1	265.176-177	H032
X				Proper containment and collection systems in place	265a.179		H033
X				Air emission standards complied with (AA, BB, CC)	265a.1	265.178	H034
			X	Containers clearly marked with accumulation date and visible for inspection	262a.10	262.34(a)(2)	H035
X				Containers labeled "Hazardous Waste"	262a.10	262.34(a)(3)	H036
X				Containers labeled accurately identify contents	SWMA 6018.403(b) (2)		H037



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU WASTE MANAGEMENT

Inspection ID _____

Field Code _____

INSPECTION REPORT – RESIDUAL WASTE GENERATOR

Site I.D.: PAD046538211Site Name: Lyondell Chemical CompanyAddress: 3801 West Chester PikeNewtown Square, PA 19073Municipality: Newtown TownshipResponsible Official: Mr. Thomas BakerPerson Interviewed: SAAInspector: Jason OseredzukeFACTS ID #: PF _____ SF _____Inspection Date: 11 / 06 / 2007 Type: RoutineTelephone #: 610-359-4849

Operator Name: _____

Address: _____

County: Delaware CountyTitle: Principal Environmental EngineerTitle: SAATitle: Solid Waste SpecialistNo. of Violations: See Report Time: _____

SEE 2006 RESIDUAL WASTE BIENNIAL REPORT

Waste Description: _____	Waste Code: _____
Treatment: <input type="checkbox"/> Yes <input type="checkbox"/> No	Type: _____
Type of Storage: <input type="checkbox"/> Containers <input type="checkbox"/> Tanks <input type="checkbox"/> Piles <input type="checkbox"/> Impoundments	
Disposition: Destination Facility _____	
Location: _____	Type: _____
Amount Generated: _____	lb./mo.
Waste Description: _____	Waste Code: _____
Treatment: <input type="checkbox"/> Yes <input type="checkbox"/> No	Type: _____
Type of Storage: <input type="checkbox"/> Containers <input type="checkbox"/> Tanks <input type="checkbox"/> Piles <input type="checkbox"/> Impoundments	
Disposition: Destination Facility _____	
Location: _____	Type: _____
Amount Generated: _____	lb./mo.
Waste Description: _____	Waste Code: _____
Treatment: <input type="checkbox"/> Yes <input type="checkbox"/> No	Type: _____
Type of Storage: <input type="checkbox"/> Containers <input type="checkbox"/> Tanks <input type="checkbox"/> Piles <input type="checkbox"/> Impoundments	
Disposition: Destination Facility _____	
Location: _____	Type: _____
Amount Generated: _____	lb./mo.
Waste Description: _____	Waste Code: _____
Treatment: <input type="checkbox"/> Yes <input type="checkbox"/> No	Type: _____
Type of Storage: <input type="checkbox"/> Containers <input type="checkbox"/> Tanks <input type="checkbox"/> Piles <input type="checkbox"/> Impoundments	
Disposition: Destination Facility _____	
Location: _____	Type: _____
Amount Generated: _____	lb./mo.

Site Name Lyondell Chemical Company
 ID Number PAD046538211
 Date 11/06/2007

INSPECTION REPORT – RESIDUAL WASTE GENERATOR (Cont'd)

1 - No Violation Observed 2 - Not-Applicable 3 - Not-Determined 4 - Non-Compliance

STATUS				GENERAL REQUIREMENTS	COMMENTS ATTACHED	CHAPTER CITATION	LINE ITEM
1	2	3	4				
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Designated facility: valid permit? Permit Number (PA) _____	<input type="checkbox"/>	287.6	1
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Biennial report submitted by March 1 of each odd numbered year.	<input type="checkbox"/>	287.52(a)	2
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Written source reduction strategy on file and in effect.	<input type="checkbox"/>	287.53	3
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste reduction strategy covers all waste streams.	<input type="checkbox"/>	287.53(b)	4
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reduction strategy updated every five years or when waste or manufacturing process changes.	<input type="checkbox"/>	287.53(c)	5
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste analysis performed: copy on file.	<input type="checkbox"/>	287.54	6
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Annual analysis or certification of waste submitted to Department and designated facility.	<input type="checkbox"/>	287.54(b)(f)	7
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Chemical analysis updated every five years or when waste or manufacturing process changes.	<input type="checkbox"/>	287.54(g)	8
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Generator record keeping requirements.	<input type="checkbox"/>	287.55	9
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Operation of disposal or processing facility without a permit.	<input type="checkbox"/>	287.101(a)	10
				STORAGE REQUIREMENTS			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Residual waste not mixed with hazardous waste.	<input type="checkbox"/>	299.111(1)	11
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste stored as not to create a safety risk.	<input type="checkbox"/>	299.111(2)	12
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Residual waste not mixed with special handling waste.	<input type="checkbox"/>	299.111(3)	13
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste not blown or otherwise deposited outside storage area.	<input type="checkbox"/>	299.111(4)	14
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storage area inspected; records available.	<input type="checkbox"/>	299.112(c)	15
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All waste stored less than one year.	<input type="checkbox"/>	299.113(a)	16
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Equipment maintained in operable condition.	<input type="checkbox"/>	299.114(a)	17
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Equipment cleaning frequencies maintained.	<input type="checkbox"/>	299.114(c)	18
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vectors controlled and minimized.	<input type="checkbox"/>	299.115	19
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Run on, runoff minimized; storage areas managed in accordance with Clean Streams Law.	<input type="checkbox"/>	299.116(a)(b)	20
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste stored to prevent groundwater degradation.	<input type="checkbox"/>	299.116(c)	21
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sufficient number of properly constructed storage containers.	<input type="checkbox"/>	299.121	22
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storage containers labeled properly.	<input type="checkbox"/>	299.121(d)	23
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storage container height and access requirements.	<input type="checkbox"/>	299.121(e)	24
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storage tank design standards.	<input type="checkbox"/>	299.122	25
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storage tanks labeled properly.	<input type="checkbox"/>	299.122(a)	26
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No putrescible waste or liquid waste stored in piles.	<input type="checkbox"/>	299.112(d), 299.131(b)	27
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste storage pile area properly designed, constructed and maintained.	<input type="checkbox"/>	299.131	28
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storage pad or liner system properly designed and maintained.	<input type="checkbox"/>	299.132	29
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper design and maintenance of leachate and runoff control systems.	<input type="checkbox"/>	299.133	30
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper storage and containment of incinerator ash residue.	<input type="checkbox"/>	299.151	31
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper storage and containment of friable asbestos containing waste.	<input type="checkbox"/>	299.152	32
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper storage and containment of coal ash.	<input type="checkbox"/>	299.153	33
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper storage and containment of PCB containing waste material.	<input type="checkbox"/>	299.154	34
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper storage of whole and processed tires.	<input type="checkbox"/>	299.155	35
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

Inspection ID _____

Field Code _____

INSPECTION REPORT INFECTIOUS OR CHEMOTHERAPEUTIC WASTE GENERATOR

Site I.D.: PAD046538211
 Site Name: Lyondell Chemical Company
 Address: 3801 West Chester Pike
Newtown Square, PA 19073
 Municipality: Newtown Township
 Responsible Official: Mr. Thomas Baker
 Person Interviewed: SAA
 Inspector: Jason Oseredzuk
 Inspection Date: 11/06/2007
 eFACTS ID #: PF _____ SF _____

Telephone #: 610-359-4849
 Operator Name: _____
 Address: _____
 County: Delaware
 Title: Principal Environmental Engineer
 Title: SAA
 Title: Solid Waste Specialist
 # Violation: _____

Comment: _____

Inspection Date: 11 / 06 / 2007 Type: Routine Results: See Report Resolved: _____

Permit Expiration Date: / / Days/Week Operated: 7 days/week Max. Daily Volume: _____

Infectious and chemotherapeutic waste generated: _____ kg/month

1 - No Violation Observed 2 - Not-Applicable 3 - Not-Determined 4 - Non-Compliance

STATUS				REQUIREMENT	COMMENTS ATTACHED	CHAPTER CITATION	LINE ITEM
1	2	3	4				
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storage in compliance with §§ 284.401-284.419.	<input type="checkbox"/>	284.401	1
BASIC STORAGE							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Integrity of containers maintained, leakage and releases prevented.	<input type="checkbox"/>	284.411(a)(1)	2
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Spread of infectious agents prevented; vectors controlled.	<input type="checkbox"/>	284.411(a)(2),(3)	3
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste maintained in a nonputrescent state; odors prevented.	<input type="checkbox"/>	284.411(a)(4),(5)	4
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Unauthorized access to waste prevented; enclosures and containers secured.	<input type="checkbox"/>	284.411(a)(6)(i)	5
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enclosures or containers marked with prominent warning signs.	<input type="checkbox"/>	284.411(a)(6)(ii)	6
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enclosures capable of being readily maintained in a sanitary condition.	<input type="checkbox"/>	284.411(b)	7
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste not commingled with other waste.	<input type="checkbox"/>	284.411(c)	8
SORTING							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste placed in separate containers from other waste at the point of origin.	<input type="checkbox"/>	284.412(a)	9
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste stored together in the same container only with Department approval.	<input type="checkbox"/>	284.412(b)	10
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste sorted properly according to class, and each class of waste placed in a separate container	<input type="checkbox"/>	284.412(d)(1)-(3) (e)(1)-(3)	11
DURATION OF STORAGE							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious waste stored for no longer than 30 days at room temperature.	<input type="checkbox"/>	284.413(a)(1),(2)	12
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious waste stored for no longer than 90 days in a freezer	<input type="checkbox"/>	284.413(a)(3)	13
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Putrescent infectious waste moved off-site within 24 hours	<input type="checkbox"/>	284.413(b)	14
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious waste sharps managed according to 284.411	<input type="checkbox"/>	284.413(c)	15

Site Name	Lyondell Chemical Company
ID Number	PAD046538211
Date	11/06/2007

INSPECTION REPORT

INFECTIOUS OR CHEMOTHERAPEUTIC WASTE GENERATOR (Cont'd)

1 - No Violation Observed 2-Not-Applicable 3-Not-Determined 4-Non-Compliance

STATUS				REQUIREMENT	COMMENTS ATTACHED	CHAPTER CITATION	LINE ITEM
1	2	3	4				
STORAGE CONTAINERS							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste stored in proper containers	<input type="checkbox"/>	284.415(a)(1)-(3)	16
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Used sharps stored in proper containers.	<input type="checkbox"/>	284.415(b)(1)-(3)	17
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste fluids stored in proper containers.	<input type="checkbox"/>	284.415(c)(1)(2)	18
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Double bagging employed when bags are the only storage container. Bags meet strength and certification requirements.	<input type="checkbox"/>	284.415(d)(1)-(4)	19
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yellow bags used for chemotherapeutic waste; red bags used for infectious waste.	<input type="checkbox"/>	284.415(d)(5)	20
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Protective clothing worn by persons packaging infectious or chemotherapeutic waste for offsite shipment.	<input type="checkbox"/>	284.415(f)	21
MARKING OF CONTAINERS							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Outermost container of infectious or chemotherapeutic waste for offsite transport labeled immediately with proper label.	<input type="checkbox"/>	284.416(a),(b)	22
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Outermost container of infectious or chemotherapeutic waste properly labeled with biohazard symbol and "infectious waste" or "chemotherapeutic waste."	<input type="checkbox"/>	284.416(c)	23
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Labeling information colored red for infectious waste, yellow for chemotherapeutic waste, with contrasting color backgrounds.	<input type="checkbox"/>	284.416(d)	24
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stationery containers lined with appropriately colored bag.	<input type="checkbox"/>	284.416(e)	25
REUSE OF CONTAINERS							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Nonrigid containers not reused.	<input type="checkbox"/>	284.417(a)	26
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Corrugated fiberboard containers reused only if container protected from waste.	<input type="checkbox"/>	284.417(b)	27
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Rigid, nonfiberboard containers reused only if container protected from waste or container has been decontaminated by approved means.	<input type="checkbox"/>	284.417(c)(1)(2)	28
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Rigid containers used to store chemotherapeutic waste reused only if container protected from waste.	<input type="checkbox"/>	284.417(d)	29
MANIFESTING							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Manifest prepared as required.	<input type="checkbox"/>	284.712(a)-(e)	30
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Exception reporting conducted as required.	<input type="checkbox"/>	284.714(a)-(c)	31
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Manifest copies maintained for at least 5 years.	<input type="checkbox"/>	284.703(b)	32
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

Commonwealth of Pennsylvania
Department of Environmental Protection
Bureau of Land Recycling & Waste Management

Inspection Report Comments

Date of Inspection 11/06/2007 Identification Number PAD046538211

Company/Facility/Site Name Lyondell Chemical Company

On November 06, 2007, I (Jason Oseredzuk) conducted a Large Quantity Generator of Hazardous and Residual Waste and Infectious or Chemotherapeutic Waste Generator inspection of Lyondell Chemical Company located in Newtown Township, Delaware County. Mr. Thomas Baker, Principal Environmental Engineer, was present for the facility. Lyondell Chemical Company is a Research and Development facility for petrochemicals, fuels and derivatives.

Hazardous waste is generated in process areas throughout the facility. The process areas consist of standard labs, larger bays labs, high pressure cell labs and pilot plants. Hazardous waste is typically generated through satellite accumulation of lab wastes. All satellite accumulation containers were properly labeled with the words "hazardous waste" or with other words that identify the contents. Full hazardous waste accumulation containers are consolidated at nearby waste collection areas and will be taken to one of the main storage areas to be consolidated in drums or stored as lab pack waste to be categorized during the next hazardous waste shipment. While most of the consolidation areas are at or near the point of generation and are therefore under the control of the operator of the process generating the waste, some consolidation areas are outside of the building where the waste is generated and are therefore subject to 90 storage requirements. In one such storage area, a bag containing lab pack materials properly labeled as hazardous waste was observed without an accumulation start date visible for inspection, **contrary to 40 CFR 262.34(a)(3)**. Mr. Baker dated the waste during the inspection, thereby correcting the violation. In Bay 4, one container being used for the accumulation of hazardous waste was observed without a lid, **contrary to 40 CFR 265.173(a)**. Mr. Baker closed the container during the inspection, thereby correcting the violation.

The main hazardous waste storage pad was observed. The surface of the concrete pad has been made impervious and any spilled material will drain to a blind sump for collection and remediation. Flammable materials cabinets are used for the storage of lab pack hazardous waste awaiting disposal. All hazardous waste containers were observed to be properly labeled and dated. The storage area is used for the storage of containerized residual waste as well. All residual waste containers were observed to be properly labeled.

A second hazardous waste storage pad exists near the facility's Pilot Plant Building. No hazardous waste was observed on this pad on the day of inspection. This storage pad is also equipped with a containment and collection system. The aboveground storage tank for the facility's residual wastewater was observed. The tank is properly labeled as residual waste and wastewater. Mr. Baker described this waste

This inspection report is notice of the findings of an inspection conducted by a representative of the Department. This report is formal notification of any violations observed during the inspection. Additional notification of violations may be issued concerning either violations noted herein, or other violations identified as a result of review of laboratory analyses or Department records.

This report does not constitute an order or other appealable action of the Department. Nothing contained herein shall be deemed to grant or imply immunity from legal action for any violation noted herein.

Signature by the person interviewed does not necessarily imply concurrence with the findings on this report, but does acknowledge that the person was shown the report or that a copy was left with the person.

Person interviewed (signature) Thomas Baker Date 11/06/2007
Inspector (signature) Jason Oseredzuk Date 11/06/2007
Page 8 of 9

Commonwealth of Pennsylvania
Department of Environmental Protection
Bureau of Land Recycling & Waste Management

Inspection Report CommentsDate of Inspection 11/06/2007 Identification Number PAD046538211Company/Facility/Site Name Lyondell Chemical Company

stream as non-contact process water that is discharged to DELCORA under a discharge permit with monitoring conditions.

The drug testing room was visited, and one properly labeled and lined infectious was container was observed.

Hazardous waste, residual waste and infectious waste manifests were reviewed and were found to be complete and properly maintained. The 2005 Hazardous Waste Biennial Report, 2006 Residual Waste Biennial Report and 2006 Chemical Analysis Report (26R) were briefly reviewed. Mr. Baker detailed the process for hazardous waste management annual training and displayed the content of the training program as well as the list of employees that received the training last year. Training will be conducted next month for 2007. The weekly hazardous/residual waste storage area inspection records were reviewed and were found to be complete. The facility's PPC Plan, last revised in July 2005 was reviewed. The facility's hazardous/residual waste Source Reduction Strategy was briefly reviewed.

No other violations were noted.

This inspection report is notice of the findings of an inspection conducted by a representative of the Department. This report is formal notification of any violations observed during the inspection. Additional notification of violations may be issued concerning either violations noted herein, or other violations identified as a result of review of laboratory analyses or Department records.

This report does not constitute an order or other appealable action of the Department. Nothing contained herein shall be deemed to grant or imply immunity from legal action for any violation noted herein.

Signature by the person interviewed does not necessarily imply concurrence with the findings on this report, but does acknowledge that the person was shown the report or that a copy was left with the person.

Person interviewed (signature) Thomas Baker Date 11/06/2007Inspector (signature) James G. Galt Date 11/06/2007



**COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT**

Inspection Date 02/08/2006

Time Start _____

Time Finish _____

HAZARDOUS WASTE INSPECTION REPORT☒ **GENERATOR**☐ **S Q GENERATOR**Company name Lyondell Chemical Company I.D. Number PAD046538211Site Address 3801 West Chester PikeCounty Delaware Municipality Newtown Township Zip 19073Name of Inspector Melissa Rose and Joseph VitelloName & Title of Responsible Official Thomas Baker - Health, Safety, and Environmental SupervisorPerson Interviewed Thomas Baker Telephone (610) 359-4849Mailing Address (if different from above) 3801 West Chester Pike, Newtown Square, PA 19073Amount of Hazardous Waste Generated per Month: >>2,200 Pounds _____ Kgs _____**1. Site Characterization:**STORAGE: ☒ Container ☐ Tanks ☐ Containment Bldg. ☐ Drip Pad Other _____PBR: ☐ Neutralization/WWTP ☐ Reclaim Other _____GENERATOR TREATMENT ☐ Containers ☐ Tanks ☐ Containment Bldg. ☐ Drip Pad**2. Universal Waste:** ☐ Large Quantity Handler ☒ Small Quantity HandlerUniversal Waste Types Fluorescent bulbs**3. Hazardous Waste Transporters:**Transporter Name Onyx Environmental Services License Number PA-AH 0500Transporter Name Dart Trucking Company, Inc. License Number PA-AH 0219Transporter Name Environ Transport Group, Inc. License Number (NJ) 7107**4. Types of hazardous waste generated and destination facility (location & type).**

Waste Code	Waste Description	Destination Facility
F003	Waste flammable liquids (acetone, methyl alcohol)	Onyx Environmental Services, OHD093945293
F003	Waste flammable solids, toxic (acetone, chloroform)	Onyx, OH
F003	Waste toxic (allyl alcohol, toluene diisocyanate)	Onyx, NJ
D001	Waste flammable liquids (Acetaldehyde, methanol) (propylene oxide)	Onyx, OH
D001	Waste propylene, isobutylene, n-butane)	Onyx, NJD980536593

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

HAZARDOUS WASTE INSPECTION REPORT GENERATORS -- SMALL QUANTITY GENERATORS

Site Name Lyondell Chemical Company ID Number PAD046538211 Date 02/08/2006

1 - No Violation Observed 2 - Not Applicable 3 - Not Determined 4 - Non Compliance

STATUS

1	2	3	4	REQUIREMENT	PA CIT. 25 PA Code	FED. CIT. 40 CFR	LINE NO.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hazardous waste determination performed on all waste streams	262a.10	262.11	H001
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Identification Number	262a.10	262.12	H002
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Authorized transporters only	262a.10	262.12(c)	H003
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Subsequent notification requirements met	262a.12(b)		H004
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper manifest used	262a.10	262.21	H005
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Manifests filled out correctly and completely	262a.20		H006
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Manifests signed and routed properly	262a.23(a)	262.23	H007
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Generator waste accumulated on site for 90 days or less	262a.10	262.34(a)	H008
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SQG waste accumulated on site for 180 days max unless 200 mile distance rule applies - 270 days	262a.10	262.34(e)(f)	H009
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SQG waste accumulated on-site never exceeds 6000 kg	262a.10	262.34(e)(f)	H010
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Satellite accumulation requirements complied with	262a.10	262.34(c)	H011
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personnel training program per 265.16 complied with	262a.10	262.34(a)(4) 262.34(d)	H012
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Manifest exception and biennial reports retained for 3 years	262a.10	262.40(a)(b)	H013
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Specified records retained for three years	262a.10	262.40(c)	H014
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Biennial reports submitted to the Department (LQG only)	262a.41	262.41	H015
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Exception reporting procedures followed	262a.42	262.42	H016
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Spill reporting procedures followed	262a.10	262.34(d)	H017
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PPC plan developed and implemented	262a.10	262.34(a)	H018
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Special requirements followed for international shipments	262a.10	262.50 262.60	H019
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Source reduction strategy prepared and available (LQG only)	262a.100		H020
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Excluded waste complies with exclusionary requirements	261a.4	261.4	H021
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

**HAZARDOUS WASTE INSPECTION REPORT
GENERATORS -- SMALL QUANTITY GENERATORS
FACILITY SPECIFICS**

Site Name Lyondell Chemical Company ID Number PAD046538211 Date 02/08/2006

1 - No Violation Observed 2 - Not Applicable 3 - Not Determined 4 - Non Compliance

STATUS

1	2	3	4	REQUIREMENT	PA CIT. 25 PA Code	FED CIT. 40 CFR	LINE NO.
				CONTAINERS (Subchapter I)			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers managed in compliance with 40 CFR Part 265 Subpart I and 25 PA Code Chapter 265a Subchapter I	262a.10	262.34	H025
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers of hazardous waste in good condition	265a.1	265.171	H026
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers and stored waste compatible	265a.1	265.172	H027
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers kept closed except during addition or removal of wastes	265a.1	265.173(a)	H028
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers managed to prevent leaks	265a.1	265.173(b)	H029
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Container configuration and spacing insures safe management and access for inspection purposes and emergency equipment	265a.173		H030
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Container storage areas inspected at least weekly	265a.1	265.174	H031
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Special requirements for ignitable or reactive and incompatible waste complied with	265a.1	265.176-177	H032
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper containment and collection systems in place	265a.179		H033
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Air emission standards complied with (AA, BB, CC)	265a.1	265.178	H034
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers clearly marked with accumulation date and visible for inspection	262a.10	262.34(a)(2)	H035
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers labeled "Hazardous Waste"	262a.10	262.34(a)(3)	H036
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers labeled accurately identify contents	SWMA 6018.403(b) (2)		H037



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

Inspection ID _____

Field Code _____

INSPECTION REPORT – RESIDUAL WASTE GENERATOR

Site I.D.: PAD046538211Telephone #: 610-359-4849Site Name: Lyondell Chemical Company

Operator Name: _____

Address: 3801 West Chester Pike, Newtown Square, PA 19073

Address: _____

Municipality: Newtown TownshipCounty: Delaware

Responsible Official: _____

Title: _____

Person Interviewed: Thomas BakerTitle: Environmental SupervisorInspector: Melissa Rose and Joseph VitelloTitle: Waste Management SpecialisteFACTS ID #: PF _____ SF _____Inspection Date: 02 / 08 / 2006Type: routineNo. of Violations: 0

Time: _____

Waste Description: see 2004 Residual Waste Biennial Report

Waste Code: _____

Treatment: ☐ Yes ☐ No

Type: _____

Type of Storage: ☐ Containers ☐ Tanks ☐ Piles ☐ Impoundments

Disposition: Destination Facility _____

Location: _____

Type: _____

Amount Generated: _____ lb./mo.

Waste Description: _____

Waste Code: _____

Treatment: ☐ Yes ☐ No

Type: _____

Type of Storage: ☐ Containers ☐ Tanks ☐ Piles ☐ Impoundments

Disposition: Destination Facility _____

Location: _____

Type: _____

Amount Generated: _____ lb./mo.

Waste Description: _____

Waste Code: _____

Treatment: ☐ Yes ☐ No

Type: _____

Type of Storage: ☐ Containers ☐ Tanks ☐ Piles ☐ Impoundments

Disposition: Destination Facility _____

Location: _____

Type: _____

Amount Generated: _____ lb./mo.

Waste Description: _____

Waste Code: _____

Treatment: ☐ Yes ☐ No

Type: _____

Type of Storage: ☐ Containers ☐ Tanks ☐ Piles ☐ Impoundments

Disposition: Destination Facility _____

Location: _____

Type: _____

Amount Generated: _____ lb./mo.

Site Name Lyondell Chemical Company

ID Number PAD046538211

Date 02/08/06

INSPECTION REPORT – RESIDUAL WASTE GENERATOR (Cont'd)

1 - No Violation Observed 2 - Not-Applicable 3 - Not-Determined 4 - Non-Compliance

[illegible]



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

Inspection ID _____

Field Code _____

INSPECTION REPORT INFECTIOUS OR CHEMOTHERAPEUTIC WASTE GENERATOR

Site I.D.: PAD046538211
Site Name: Lyondell Chemical Company
Address: 3801 West Chester Pike, Newtown Square, PA 19073

Telephone #: 610-359-4849
Operator Name: _____
Address: _____

Municipality: Newtown Township
Responsible Official: _____
Person Interviewed: Thomas Baker
Inspector: Melissa Rose and Joseph Vitello
Inspection Date: 02/08/06

County: Delaware
Title: _____
Title: Environmental Supervisor
Title: Waste Management Specialist
Violation: 0

eFACTS ID #: PF _____ SF _____

Comment: _____

Inspection Date: 02/08/06 Type: routine Results: 0 violations Resolved: / /

Permit Expiration Date: / / Days/Week Operated: _____ Max. Daily Volume: _____

Infectious and chemotherapeutic waste generated: 1 box/month kg/month

1 - No Violation Observed 2 - Not-Applicable 3 - Not-Determined 4 - Non-Compliance

STATUS				REQUIREMENT	COMMENTS ATTACHED	CHAPTER CITATION	LINE ITEM
1	2	3	4				
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storage in compliance with §§ 284.401-284.419.	<input type="checkbox"/>	284.401	1
BASIC STORAGE							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Integrity of containers maintained, leakage and releases prevented.	<input type="checkbox"/>	284.411(a)(1)	2
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Spread of infectious agents prevented; vectors controlled.	<input type="checkbox"/>	284.411(a)(2),(3)	3
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste maintained in a nonputrescent state; odors prevented.	<input type="checkbox"/>	284.411(a)(4),(5)	4
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Unauthorized access to waste prevented; enclosures and containers secured.	<input type="checkbox"/>	284.411(a)(6)(i)	5
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enclosures or containers marked with prominent warning signs.	<input type="checkbox"/>	284.411(a)(6)(ii)	6
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enclosures capable of being readily maintained in a sanitary condition.	<input type="checkbox"/>	284.411(b)	7
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste not commingled with other waste.	<input type="checkbox"/>	284.411(c)	8
SORTING							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste placed in separate containers from other waste at the point of origin.	<input type="checkbox"/>	284.412(a)	9
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste stored together in the same container only with Department approval.	<input type="checkbox"/>	284.412(b)	10
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste sorted properly according to class, and each class of waste placed in a separate container	<input type="checkbox"/>	284.412(d)(1)-(3) (e)(1)-(3)	11
DURATION OF STORAGE							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious waste stored for no longer than 30 days at room temperature.	<input type="checkbox"/>	284.413(a)(1),(2)	12
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious waste stored for no longer than 90 days in a freezer	<input type="checkbox"/>	284.413(a)(3)	13
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Putrescent infectious waste moved off-site within 24 hours	<input type="checkbox"/>	284.413(b)	14
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious waste sharps managed according to 284.411	<input type="checkbox"/>	284.413(c)	15

Site Name	Lyondell Chemical Company
ID Number	PAD046538211
Date	02/08/06

INSPECTION REPORT
INFECTIOUS OR CHEMOTHERAPEUTIC WASTE GENERATOR (Cont'd)

1 - No Violation Observed 2-Not-Applicable 3-Not-Determined 4-Non-Compliance

[illegible]

Commonwealth of Pennsylvania
Department of Environmental Protection
Bureau of Land Recycling & Waste Management

Inspection Report Comments

Date of Inspection February 8, 2006 Identification Number PAD046538211

Company/Facility/Site Lyondell Chemical Company

A routine inspection of the hazardous, residual, and infectious waste handling methods at Lyondell Chemical Company, located in Newtown Township, Delaware County, was conducted on February 8, 2006 by Melissa Rose and Joseph Vitello, Waste Management Specialists, of the Department. Mr. Thomas Baker, Health, Safety, and Environmental Supervisor, was present for Lyondell.

A walk-around tour of the facility was lead by Mr. Baker. The Newtown Lyondell site is a Research and Development facility for their parent Lyondell chemical company. They are listed as a large quantity generator (LQG) of hazardous waste with EPA ID# PAD046538211.

Hazardous waste is generated primarily in satellite accumulation containers from lab wastes from their R&D operation. Lyondell operates "bay" lab areas of their B and E buildings. Several "lab banks" and bay areas (bays 2, 3, 4, 5, 6, and pilot bay areas 2, 3, and 4) were inspected. All hazardous waste satellite accumulation containers were properly labeled with Lyondell hazardous waste tags. These containers are primarily glass chemical bottles and jugs, and when they are full, they are dated and placed in the nearest satellite collection "pick up" area, to again be collected (usually 3 times a week) by a member of the hazardous waste team to be consolidated into drums or labpacks, and placed in one of the main storage areas.

The main hazardous and residual waste storage area outside of the B building was inspected. It was properly labeled and had proper containment. All hazardous drums were labeled and dated correctly; the oldest drum was dated 01/18/06. Lyondell operates a glass-crushing machine in this area as well. Crushed glass and consolidated lab trash are placed into residual waste drums.

The smaller storage area outside of the E building was observed. It was properly labeled and had proper containment. No waste was observed in this area.

Lyondell's aboveground residual wastewater tank was observed. It was properly labeled "residual waste" and "waste water," in compliance with the PA Residual Waste Regulations. The water is discharged

This inspection report is notice of the findings of an inspection conducted by a representative of the Department. This report is formal notification of any violations observed during the inspection. Additional notification of violations may be issued concerning either violations noted herein, or other violations identified as a result of review of laboratory analyses or Department records.

This report does not constitute an order or other appealable action of the Department. Nothing contained herein shall be deemed to grant or imply immunity from legal action for any violation noted herein.

Signature by the person interviewed does not necessarily imply concurrence with the findings on this report, but does acknowledge that the person was shown the report or that a copy was left with the person.

Person interviewed (signature)

Thomas Baker

Date

2/8/06

Inspector (signature)

Melissa Rose

Date

2/8/06

Commonwealth of Pennsylvania
Department of Environmental Protection
Bureau of Land Recycling & Waste Management

Inspection Report Comments

Date of Inspection February 8, 2006 Identification Number PAD046538211

Company/Facility/Site Lyondell Chemical Company

daily to the local POTW per discharge permit #2DC-09-02 from DELCORA (effective July 19, 2004; expires July 18, 2008).

Infectious waste generated at the facility is from routine Lyondell employee drug tests. The drug testing room was observed. One empty red infectious waste container was observed in the room. It was lined with a red bag and was properly labeled. Stericycle makes regularly scheduled visits to Lyondell for the transport of infectious waste. Infectious waste manifests were reviewed from 2005 – present and found to be in compliance.

A paperwork review was conducted. The following items were reviewed and found to be in compliance: 2005 Chemical Analysis Report (26R), 2003 Hazardous Waste Biennial Report, 2004 Residual Waste Biennial Report, weekly inspection logs of the hazardous/residual waste storage areas, hazardous waste employee training records, Hazardous and non-hazardous waste manifests from 2005 – present, PPC Plan (last updated July 2005), and Source Reduction Strategy (last updated February 25, 2005).

No violations were noted.

This inspection report is notice of the findings of an inspection conducted by a representative of the Department. This report is formal notification of any violations observed during the inspection. Additional notification of violations may be issued concerning either violations noted herein, or other violations identified as a result of review of laboratory analyses or Department records.

This report does not constitute an order or other appealable action of the Department. Nothing contained herein shall be deemed to grant or imply immunity from legal action for any violation noted herein.

Signature by the person interviewed does not necessarily imply concurrence with the findings on this report, but does acknowledge that the person was shown the report or that a copy was left with the person.

Person interviewed (signature) Thomas P. Baker Date 2/8/06

Inspector (signature) Melissa Rose Date 2/8/06



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

Inspection Date 6/2/2004Time Start 1:00 PMTime Finish 4:00 PM**HAZARDOUS WASTE INSPECTION REPORT**☒ **GENERATOR**☐ **S Q GENERATOR**Company name Lyondell Chemical Company I.D. Number PAD046538211Site Address 3801 West Chester PikeCounty Delaware Municipality Newtown Township Zip 19073Name of Inspector Melissa MenkevichName & Title of Responsible Official Thomas Baker - Health, Safety, and Environmental SupervisorPerson Interviewed Thomas Baker Telephone (610) 359-4849Mailing Address (if different from above) 3801 West Chester Pike, Newtown Square, PA 19073Amount of Hazardous Waste Generated per Month: >>2,200 Pounds _____ Kgs _____**1. Site Characterization:**STORAGE: ☒ Container ☐ Tanks ☐ Containment Bldg. ☐ Drip Pad Other _____PBR: ☐ Neutralization/WWTP ☐ Reclaim Other _____GENERATOR TREATMENT ☐ Containers ☐ Tanks ☐ Containment Bldg. ☐ Drip Pad**2. Universal Waste:** ☐ Large Quantity Handler ☒ Small Quantity HandlerUniversal Waste Types Fluorescent bulbs**3. Hazardous Waste Transporters:**Transporter Name Onyx Environmental Services License Number PA-AH 0500Transporter Name Dart Trucking Company, Inc. License Number PA-AH 0219Transporter Name Environ Transport Group, Inc. License Number (NJ) 7107**4. Types of hazardous waste generated and destination facility (location & type).**

Waste Code	Waste Description	Destination Facility
F003	Waste flammable liquids (acetone, isopropanol)	Onyx Environmental Services, OHD093945293
F003	Waste flammable solids, toxic (acetone, chloroform)	Onyx, OH
D001, D002, D009, D003	lab packs	Onyx, NJD000692061

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

HAZARDOUS WASTE INSPECTION REPORT GENERATORS -- SMALL QUANTITY GENERATORS

Site Name Lyondell Chemical Company ID Number PAD046538211 Date 6/2/2004

1 - No Violation Observed 2 - Not Applicable 3 - Not Determined 4 - Non Compliance

STATUS

1	2	3	4	REQUIREMENT	PA CIT. 25 PA Code	FED. CIT. 40 CFR	LINE NO.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hazardous waste determination performed on all waste streams	262a.10	262.11	H001
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Identification Number	262a.10	262.12	H002
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Authorized transporters only	262a.10	262.12(c)	H003
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Subsequent notification requirements met	262a.12(b)		H004
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper manifest used	262a.10	262.21	H005
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Manifests filled out correctly and completely	262a.20		H006
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Manifests signed and routed properly	262a.23(a)	262.23	H007
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Generator waste accumulated on site for 90 days or less	262a.10	262.34(a)	H008
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SQG waste accumulated on site for 180 days max unless 200 mile distance rule applies - 270 days	262a.10	262.34(e)(f)	H009
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SQG waste accumulated on-site never exceeds 6000 kg	262a.10	262.34(e)(f)	H010
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Satellite accumulation requirements complied with	262a.10	262.34(c)	H011
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personnel training program per 265.16 complied with	262a.10	262.34(a)(4) 262.34(d)	H012
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Manifest exception and biennial reports retained for 3 years	262a.10	262.40(a)(b)	H013
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Specified records retained for three years	262a.10	262.40(c)	H014
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Biennial reports submitted to the Department (LQG only)	262a.41	262.41	H015
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Exception reporting procedures followed	262a.42	262.42	H016
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Spill reporting procedures followed	262a.10	262.34(d)	H017
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PPC plan developed and implemented	262a.10	262.34(a)	H018
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Special requirements followed for international shipments	262a.10	262.50 262.60	H019
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Source reduction strategy prepared and available (LQG only)	262a.100		H020
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Excluded waste complies with exclusionary requirements	261a.4	261.4	H021
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

HAZARDOUS WASTE INSPECTION REPORT GENERATORS -- SMALL QUANTITY GENERATORS FACILITY SPECIFICS

Site Name Lyondell Chemical Company ID Number PAD046538211 Date 6/2/2004

1 - No Violation Observed 2 - Not Applicable 3 - Not Determined 4 - Non Compliance

STATUS

1	2	3	4	REQUIREMENT	PA CIT. 25 PA Code	FED CIT. 40 CFR	LINE NO.
				CONTAINERS (Subchapter I)			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers managed in compliance with 40 CFR Part 265 Subpart I and 25 PA Code Chapter 265a Subchapter I	262a.10	262.34	H025
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers of hazardous waste in good condition	265a.1	265.171	H026
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers and stored waste compatible	265a.1	265.172	H027
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers kept closed except during addition or removal of wastes	265a.1	265.173(a)	H028
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers managed to prevent leaks	265a.1	265.173(b)	H029
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Container configuration and spacing insures safe management and access for inspection purposes and emergency equipment	265a.173		H030
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Container storage areas inspected at least weekly	265a.1	265.174	H031
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Special requirements for ignitable or reactive and incompatible waste complied with	265a.1	265.176-177	H032
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper containment and collection systems in place	265a.179		H033
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Air emission standards complied with (AA, BB, CC)	265a.1	265.178	H034
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers clearly marked with accumulation date and visible for inspection	262a.10	262.34(a)(2)	H035
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers labeled "Hazardous Waste"	262a.10	262.34(a)(3)	H036
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers labeled accurately identify contents	SWMA 6018.403(b) (2)		H037



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

Inspection ID _____

Field Code _____

INSPECTION REPORT – RESIDUAL WASTE GENERATOR

Site I.D.: PAD046538211
 Site Name: Lyondell Chemical Company
 Address: 3801 West Chester Pike, Newtown Square, PA 19073

Telephone #: 610-359-4849
 Operator Name: _____
 Address: _____

Municipality: Newtown TownshipCounty: Delaware

Responsible Official: _____

Title: _____

Person Interviewed: Thomas BakerTitle: Environmental SupervisorInspector: Melissa MenkevichTitle: Waste Management SpecialisteFACTS ID #: PF _____ SF _____

Inspection Date: 6 / 02 / 04 Type: routine No. of Violations: 0 Time: 1:00 PM

Waste Description: see 2002 Residual Waste Biennial Report Waste Code: _____

Treatment: ☐ Yes ☐ No Type: _____

Type of Storage: ☐ Containers ☐ Tanks ☐ Piles ☐ Impoundments

Disposition: Destination Facility _____

Location: _____ Type: _____

Amount Generated: _____ lb./mo.

Waste Description: _____ Waste Code: _____

Treatment: ☐ Yes ☐ No Type: _____

Type of Storage: ☐ Containers ☐ Tanks ☐ Piles ☐ Impoundments

Disposition: Destination Facility _____

Location: _____ Type: _____

Amount Generated: _____ lb./mo.

Waste Description: _____ Waste Code: _____

Treatment: ☐ Yes ☐ No Type: _____

Type of Storage: ☐ Containers ☐ Tanks ☐ Piles ☐ Impoundments

Disposition: Destination Facility _____

Location: _____ Type: _____

Amount Generated: _____ lb./mo.

Waste Description: _____ Waste Code: _____

Treatment: ☐ Yes ☐ No Type: _____

Type of Storage: ☐ Containers ☐ Tanks ☐ Piles ☐ Impoundments

Disposition: Destination Facility _____

Location: _____ Type: _____

Amount Generated: _____ lb./mo.

Site Name	Lyondell Chemical Company
ID Number	PAD046538211
Date	6/02/04

INSPECTION REPORT – RESIDUAL WASTE GENERATOR (Cont'd)

1 - No Violation Observed 2 - Not-Applicable 3 - Not-Determined 4 - Non-Compliance

[illegible]



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

Inspection ID _____

Field Code _____

INSPECTION REPORT INFECTIOUS OR CHEMOTHERAPEUTIC WASTE GENERATOR

Site I.D.: PAD046538211
Site Name: Lyondell Chemical Company
Address: 3801 West Chester Pike, Newtown Square, PA 19073

Telephone #: 610-359-4849
Operator Name: _____
Address: _____

Municipality: Newtown Township
Responsible Official: _____
Person Interviewed: Thomas Baker
Inspector: Melissa Menkevich
Inspection Date: 6/04/04

County: Delaware
Title: _____
Title: Environmental Supervisor
Title: Waste Management Specialist
Violation: 0

eFACTS ID #: PF _____ SF _____

Comment: _____

Inspection Date: 6/02/04 Type: routine Results: 0 violations Resolved: / /

Permit Expiration Date: / / Days/Week Operated: _____ Max. Daily Volume: _____

Infectious and chemotherapeutic waste generated: 1 box/month kg/month

1 - No Violation Observed 2 - Not-Applicable 3 - Not-Determined 4 - Non-Compliance

STATUS				REQUIREMENT	COMMENTS ATTACHED	CHAPTER CITATION	LINE ITEM
1	2	3	4				
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storage in compliance with §§ 284.401-284.419.	<input type="checkbox"/>	284.401	1
BASIC STORAGE							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Integrity of containers maintained, leakage and releases prevented.	<input type="checkbox"/>	284.411(a)(1)	2
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Spread of infectious agents prevented; vectors controlled.	<input type="checkbox"/>	284.411(a)(2),(3)	3
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste maintained in a nonputrescent state; odors prevented.	<input type="checkbox"/>	284.411(a)(4),(5)	4
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Unauthorized access to waste prevented; enclosures and containers secured.	<input type="checkbox"/>	284.411(a)(6)(i)	5
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enclosures or containers marked with prominent warning signs.	<input type="checkbox"/>	284.411(a)(6)(ii)	6
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enclosures capable of being readily maintained in a sanitary condition.	<input type="checkbox"/>	284.411(b)	7
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste not commingled with other waste.	<input type="checkbox"/>	284.411(c)	8
SORTING							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste placed in separate containers from other waste at the point of origin.	<input type="checkbox"/>	284.412(a)	9
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste stored together in the same container only with Department approval.	<input type="checkbox"/>	284.412(b)	10
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste sorted properly according to class, and each class of waste placed in a separate container	<input type="checkbox"/>	284.412(d)(1)-(3) (e)(1)-(3)	11
DURATION OF STORAGE							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious waste stored for no longer than 30 days at room temperature.	<input type="checkbox"/>	284.413(a)(1),(2)	12
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious waste stored for no longer than 90 days in a freezer	<input type="checkbox"/>	284.413(a)(3)	13
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Putrescent infectious waste moved off-site within 24 hours	<input type="checkbox"/>	284.413(b)	14
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious waste sharps managed according to 284.411	<input type="checkbox"/>	284.413(c)	15

Site Name	Lyondell Chemical Company
ID Number	PAD046538211
Date	6/02/04

INSPECTION REPORT INFECTIOUS OR CHEMOTHERAPEUTIC WASTE GENERATOR (Cont'd)

1 - No Violation Observed 2-Not-Applicable 3-Not-Determined 4-Non-Compliance

STATUS				REQUIREMENT	COMMENTS ATTACHED	CHAPTER CITATION	LINE ITEM
1	2	3	4				
STORAGE CONTAINERS							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste stored in proper containers	<input type="checkbox"/>	284.415(a)(1)-(3)	16
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Used sharps stored in proper containers.	<input type="checkbox"/>	284.415(b)(1)-(3)	17
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste fluids stored in proper containers.	<input type="checkbox"/>	284.415(c)(1)(2)	18
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Double bagging employed when bags are the only storage container. Bags meet strength and certification requirements.	<input type="checkbox"/>	284.415(d)(1)-(4)	19
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yellow bags used for chemotherapeutic waste; red bags used for infectious waste.	<input type="checkbox"/>	284.415(d)(5)	20
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Protective clothing worn by persons packaging infectious or chemotherapeutic waste for offsite shipment.	<input type="checkbox"/>	284.415(f)	21
MARKING OF CONTAINERS							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Outermost container of infectious or chemotherapeutic waste for offsite transport labeled immediately with proper label.	<input type="checkbox"/>	284.416(a),(b)	22
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Outermost container of infectious or chemotherapeutic waste properly labeled with biohazard symbol and "infectious waste" or "chemotherapeutic waste."	<input type="checkbox"/>	284.416(c)	23
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Labeling information colored red for infectious waste, yellow for chemotherapeutic waste, with contrasting color backgrounds.	<input type="checkbox"/>	284.416(d)	24
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stationery containers lined with appropriately colored bag.	<input type="checkbox"/>	284.416(e)	25
REUSE OF CONTAINERS							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Nonrigid containers not reused.	<input type="checkbox"/>	284.417(a)	26
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Corrugated fiberboard containers reused only if container protected from waste.	<input type="checkbox"/>	284.417(b)	27
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Rigid, nonfiberboard containers reused only if container protected from waste or container has been decontaminated by approved means.	<input type="checkbox"/>	284.417(c)(1)(2)	28
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Rigid containers used to store chemotherapeutic waste reused only if container protected from waste.	<input type="checkbox"/>	284.417(d)	29
MANIFESTING							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Manifest prepared as required.	<input type="checkbox"/>	284.712(a)-(e)	30
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Exception reporting conducted as required.	<input type="checkbox"/>	284.714(a)-(c)	31
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Manifest copies maintained for at least 5 years.	<input type="checkbox"/>	284.703(b)	32
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		

Commonwealth of Pennsylvania
Department of Environmental Protection
Bureau of Land Recycling & Waste Management

Inspection Report Comments

Date of Inspection June 02, 2004 Identification Number PAD046538211

Company/Facility/Site Lyondell Chemical Company

A routine inspection of the hazardous, residual, and infectious waste handling methods at Lyondell Chemical Company, located in Newtown Township, Delaware County, was conducted on June 2, 2004 by Melissa Menkevich, accompanied by Jeanne Thompson, Waste Management Specialists, of the Department. Mr. Thomas Baker, Health, Safety, and Environmental Supervisor, was present for Lyondell.

A walk-around tour of the facility was lead by Mr. Baker. The Newtown Lyondell site is a Research and Development facility for their parent Lyondell chemical company. They are listed as a large quantity generator (LQG) of hazardous waste with EPA ID# PAD046538211.

Hazardous waste is generated primarily in satellite accumulation containers from lab wastes from their R&D operation. Lyondell operates "bay" lab areas of their B and E buildings. Several "lab banks" and bay areas were inspected. All hazardous waste satellite accumulation containers were properly labeled with Lyondell hazardous waste tags. These containers are primarily glass chemical bottles and jugs, and when they are full, they are dated and placed in the nearest satellite collection area, to again be collected (usually 3 times a week) by a member of the hazardous waste team to be consolidated into drums or labpacks, and placed in one of the main storage areas.

The main hazardous and residual waste storage area outside of the B building was inspected. It was properly labeled and had proper containment. All hazardous drums and totes were labeled and dated correctly. All residual waste containers were in compliance as well. Lyondell operates a glass-crushing machine in this area as well. Crushed glass and consolidated lab trash are placed into residual waste drums.

The smaller storage area outside of the E building was observed. It was properly labeled and had proper containment. No waste was observed in this area.

Lyondell's aboveground residual wastewater tank was observed. It was properly labeled "residual waste" and "waste water," in compliance with the PA Residual Waste Regulations. The water is discharged

This inspection report is notice of the findings of an inspection conducted by a representative of the Department. This report is formal notification of any violations observed during the inspection. Additional notification of violations may be issued concerning either violations noted herein, or other violations identified as a result of review of laboratory analyses or Department records.

This report does not constitute an order or other appealable action of the Department. Nothing contained herein shall be deemed to grant or imply immunity from legal action for any violation noted herein.

Signature by the person interviewed does not necessarily imply concurrence with the findings on this report, but does acknowledge that the person was shown the report or that a copy was left with the person.

Person interviewed (signature) Thomas Baker Date 6-2-04

Inspector (signature) Melissa Menkevich Date 6-2-04

Commonwealth of Pennsylvania
Department of Environmental Protection
Bureau of Land Recycling & Waste Management

Inspection Report Comments

Date of Inspection June 02, 2004 Identification Number PAD046538211

Company/Facility/Site Lyondell Chemical Company

daily to the local POTW per discharge permit #202-D30 from DELCORA (effective July 19, 1999; expires July 18, 2004).

Infectious waste generated at the facility is from routine Lyondell employee drug tests. The drug testing room was observed. One empty red infectious waste container was observed in the room. It was lined with a red bag and was properly labeled. Stericycle makes regularly scheduled visits to Lyondell for the transport of infectious waste. Infectious waste manifests were reviewed from 2003– present and found to be in compliance.

A paperwork review was conducted. The following items were reviewed and found to be in compliance: 2003 Chemical Analysis Report (26R), 2003 Hazardous Waste Biennial Report, weekly inspection logs of the hazardous/residual waste storage areas, hazardous waste employee training records, Hazardous and non-hazardous waste manifests from 2003 – present. Lyondell's PPC plan should be updated to include the Department's new contact information for the Southeast Regional Office. Mr. Baker is making another revision to Lyondell's Source Reduction Strategy (25R). It has been reviewed up to March 2004.

No violations were noted.

This inspection report is notice of the findings of an inspection conducted by a representative of the Department. This report is formal notification of any violations observed during the inspection. Additional notification of violations may be issued concerning either violations noted herein, or other violations identified as a result of review of laboratory analyses or Department records.

This report does not constitute an order or other appealable action of the Department. Nothing contained herein shall be deemed to grant or imply immunity from legal action for any violation noted herein.

Signature by the person interviewed does not necessarily imply concurrence with the findings on this report, but does acknowledge that the person was shown the report or that a copy was left with the person.

Person interviewed (signature) Thomas P. Baker Date 6-2-04

Inspector (signature) Melissa Mankert Date 6-2-04



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

Inspection Date 6/30/03Time Start 11:00 AMTime Finish 4:30 PM**HAZARDOUS WASTE INSPECTION REPORT****GENERATOR****S Q GENERATOR**Company name Lyondell Chemical Company I.D. Number PAD046538211Site Address 3801 West Chester PikeCounty Delaware Municipality Newtown Township Zip 19073Name of Inspector Melissa MenkevichName & Title of Responsible Official Thomas Baker - Health, Safety, and Environmental SupervisorPerson Interviewed Thomas Baker Telephone (610) 359-4849Mailing Address (if different from above) 3801 West Chester Pike, Newtown Square, PA 19073Amount of Hazardous Waste Generated per Month: <<2,200 Pounds Kgs**1. Site Characterization:**STORAGE: ☒ Container ☐ Tanks ☐ Containment Bldg. ☐ Drip Pad Other PBR: ☐ Neutralization/WWTP ☐ Reclaim Other GENERATOR TREATMENT ☐ Containers ☐ Tanks ☐ Containment Bldg. ☐ Drip Pad**2. Universal Waste:** ☐ Large Quantity Handler ☒ Small Quantity HandlerUniversal Waste Types Fluorescent bulbs**3. Hazardous Waste Transporters:**Transporter Name Onyx Environmental Services License Number PA-AH 0500Transporter Name Dart Trucking Company, Inc. License Number PA-AH 0219Transporter Name Environ Transport Group, Inc. License Number (NJ) 7107**4. Types of hazardous waste generated and destination facility (location & type).**

Waste Code	Waste Description	Destination Facility
F003	Waste flammable liquids, corrosive	Onyx Environmental Services, NJD980536593
D001	Waste flammable solids; waste metal catalyst	Onyx, NJ
D008	Waste toxic solids, inorganic	Onyx, NJ
D003	Waste toxic liquids, organic	Onyx, NJ
D002	Waste corrosive liquids	Onyx, NJ
D007	Waste hazardous solids	Onyx, NJ
P120	Waste toxic liquids, flam. organic	Onyx, NJ
D009	Haz. waste solid	Onyx, NJ



**COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT**

Inspection Date 6/30/03

Time Start _____

Time Finish _____

HAZARDOUS WASTE INSPECTION REPORT☒ **GENERATOR**☐ **S Q GENERATOR**Company name Lyondell Chemical Company I.D. Number PAD046538211

Site Address _____

County _____ Municipality _____ Zip _____

Name of Inspector _____

Name & Title of Responsible Official _____

Person Interviewed _____ Telephone (____) _____

Mailing Address (if different from above) _____

Amount of Hazardous Waste Generated per Month: _____ Pounds _____ Kgs

1. Site Characterization:STORAGE: ☐ Container ☐ Tanks ☐ Containment Bldg. ☐ Drip Pad Other _____PBR: ☐ Neutralization/WWTP ☐ Reclaim Other _____GENERATOR TREATMENT ☐ Containers ☐ Tanks ☐ Containment Bldg. ☐ Drip Pad**2. Universal Waste:** ☐ Large Quantity Handler ☐ Small Quantity Handler

Universal Waste Types _____

3. Hazardous Waste Transporters:Transporter Name Safety-Kleen Systems, Inc. License Number PA-AH 0172

Transporter Name _____ License Number _____

Transporter Name _____ License Number _____

4. Types of hazardous waste generated and destination facility (location & type).

Waste Code	Waste Description	Destination Facility
F003	RQ Waste Flammable liquids	Onyx Env. Svcs., OHD093945293
F005	RQ waste flammable liquids	Onyx, OH
D039	Waste combustible liquids (petroleum naptha)	Safety-Kleen Systems, Inc., PAD000738849

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

HAZARDOUS WASTE INSPECTION REPORT GENERATORS -- SMALL QUANTITY GENERATORS

Site Name Lyondell Chemical Company ID Number PAD046538211 Date 6/30/03

1 - No Violation Observed 2 - Not Applicable 3 - Not Determined 4 - Non Compliance

STATUS

1	2	3	4	REQUIREMENT	PA CIT. 25 PA Code	FED. CIT. 40 CFR	LINE NO.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hazardous waste determination performed on all waste streams	262a.10	262.11	H001
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Identification Number	262a.10	262.12	H002
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Authorized transporters only	262a.10	262.12(c)	H003
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Subsequent notification requirements met	262a.12(b)		H004
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper manifest used	262a.10	262.21	H005
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Manifests filled out correctly and completely	262a.20		H006
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Manifests signed and routed properly	262a.23(a)	262.23	H007
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Generator waste accumulated on site for 90 days or less	262a.10	262.34(a)	H008
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SQG waste accumulated on site for 180 days max unless 200 mile distance rule applies - 270 days	262a.10	262.34(e)(f)	H009
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SQG waste accumulated on-site never exceeds 6000 kg	262a.10	262.34(e)(f)	H010
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Satellite accumulation requirements complied with	262a.10	262.34(c)	H011
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personnel training program per 265.16 complied with	262a.10	262.34(a)(4) 262.34(d)	H012
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Manifest exception and biennial reports retained for 3 years	262a.10	262.40(a)(b)	H013
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Specified records retained for three years	262a.10	262.40(c)	H014
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Biennial reports submitted to the Department (LQG only)	262a.41	262.41	H015
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Exception reporting procedures followed	262a.42	262.42	H016
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Spill reporting procedures followed	262a.10	262.34(d)	H017
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PPC plan developed and implemented	262a.10	262.34(a)	H018
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Special requirements followed for international shipments	262a.10	262.50 262.60	H019
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Source reduction strategy prepared and available (LQG only)	262a.100		H020
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Excluded waste complies with exclusionary requirements	261a.4	261.4	H021
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

HAZARDOUS WASTE INSPECTION REPORT GENERATORS -- SMALL QUANTITY GENERATORS FACILITY SPECIFICS

Site Name Lyondell Chemical Company ID Number PAD046538211 Date 6/30/03

1 - No Violation Observed 2 - Not Applicable 3 - Not Determined 4 - Non Compliance

STATUS

1	2	3	4	REQUIREMENT	PA CIT. 25 PA Code	FED CIT. 40 CFR	LINE NO.
				CONTAINERS (Subchapter I)			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers managed in compliance with 40 CFR Part 265 Subpart I and 25 PA Code Chapter 265a Subchapter I	262a.10	262.34	H025
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers of hazardous waste in good condition	265a.1	265.171	H026
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers and stored waste compatible	265a.1	265.172	H027
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers kept closed except during addition or removal of wastes	265a.1	265.173(a)	H028
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers managed to prevent leaks	265a.1	265.173(b)	H029
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Container configuration and spacing insures safe management and access for inspection purposes and emergency equipment	265a.173		H030
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Container storage areas inspected at least weekly	265a.1	265.174	H031
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Special requirements for ignitable or reactive and incompatible waste complied with	265a.1	265.176-177	H032
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper containment and collection systems in place	265a.179		H033
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Air emission standards complied with (AA, BB, CC)	265a.1	265.178	H034
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers clearly marked with accumulation date and visible for inspection	262a.10	262.34(a)(2)	H035
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers labeled "Hazardous Waste"	262a.10	262.34(a)(3)	H036
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Containers labeled accurately identify contents	SWMA 6018.403(b) (2)		H037



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

Inspection ID _____

Field Code _____

INSPECTION REPORT – RESIDUAL WASTE GENERATOR

Site I.D.: PAD046538211
 Site Name: Lyondell Chemical Company
 Address: 3801 West Chester Pike, Newtown Square, PA 19073

Telephone #: 610-359-4849
 Operator Name: _____
 Address: _____

Municipality: Newtown Township
 Responsible Official: _____
 Person Interviewed: Thomas Baker
 Inspector: Melissa Menkevich
 eFACTS ID #: PF _____ SF _____

County: Delaware
 Title: _____
 Title: Environmental Supervisor
 Title: Waste Management Specialist

Inspection Date: 6 /30 / 03 Type: routine No. of Violations: 0 Time: 11:00 AM

Waste Description: see 2002 Residual Waste Biennial Report Waste Code: _____

Treatment: ☐ Yes ☐ No Type: _____

Type of Storage: ☐ Containers ☐ Tanks ☐ Piles ☐ Impoundments

Disposition: Destination Facility _____

Location: _____ Type: _____

Amount Generated: _____ lb./mo.

Waste Description: _____ Waste Code: _____

Treatment: ☐ Yes ☐ No Type: _____

Type of Storage: ☐ Containers ☐ Tanks ☐ Piles ☐ Impoundments

Disposition: Destination Facility _____

Location: _____ Type: _____

Amount Generated: _____ lb./mo.

Waste Description: _____ Waste Code: _____

Treatment: ☐ Yes ☐ No Type: _____

Type of Storage: ☐ Containers ☐ Tanks ☐ Piles ☐ Impoundments

Disposition: Destination Facility _____

Location: _____ Type: _____

Amount Generated: _____ lb./mo.

Waste Description: _____ Waste Code: _____

Treatment: ☐ Yes ☐ No Type: _____

Type of Storage: ☐ Containers ☐ Tanks ☐ Piles ☐ Impoundments

Disposition: Destination Facility _____

Location: _____ Type: _____

Amount Generated: _____ lb./mo.

Site Name Lyondell Chemical Company
 ID Number PAD046538211
 Date 6/30/03

INSPECTION REPORT – RESIDUAL WASTE GENERATOR (Cont'd)

1 - No Violation Observed 2 - Not-Applicable 3 - Not-Determined 4 - Non-Compliance

STATUS				GENERAL REQUIREMENTS	COMMENTS ATTACHED	CHAPTER CITATION	LINE ITEM
1	2	3	4				
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Designated facility: valid permit? Permit Number (PA) _____	<input type="checkbox"/>	287.6	1
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Biennial report submitted by March 1 of each odd numbered year.	<input type="checkbox"/>	287.52(a)	2
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Written source reduction strategy on file and in effect.	<input type="checkbox"/>	287.53	3
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Waste reduction strategy covers all waste streams.	<input type="checkbox"/>	287.53(b)	4
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Reduction strategy updated every five years or when waste or manufacturing process changes.	<input type="checkbox"/>	287.53(c)	5
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste analysis performed: copy on file.	<input type="checkbox"/>	287.54	6
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Annual analysis or certification of waste submitted to Department and designated facility.	<input type="checkbox"/>	287.54(b)(f)	7
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Chemical analysis updated every five years or when waste or manufacturing process changes.	<input type="checkbox"/>	287.54(g)	8
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Generator record keeping requirements.	<input type="checkbox"/>	287.55	9
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Operation of disposal or processing facility without a permit.	<input type="checkbox"/>	287.101(a)	10
				STORAGE REQUIREMENTS			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Residual waste not mixed with hazardous waste.	<input type="checkbox"/>	299.111(1)	11
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste stored as not to create a safety risk.	<input type="checkbox"/>	299.111(2)	12
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Residual waste not mixed with special handling waste.	<input type="checkbox"/>	299.111(3)	13
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste not blown or otherwise deposited outside storage area.	<input type="checkbox"/>	299.111(4)	14
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storage area inspected; records available.	<input type="checkbox"/>	299.112(c)	15
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All waste stored less than one year.	<input type="checkbox"/>	299.113(a)	16
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Equipment maintained in operable condition.	<input type="checkbox"/>	299.114(a)	17
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Equipment cleaning frequencies maintained.	<input type="checkbox"/>	299.114(c)	18
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vectors controlled and minimized.	<input type="checkbox"/>	299.115	19
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Run on, runoff minimized; storage areas managed in accordance with Clean Streams Law.	<input type="checkbox"/>	299.116(a)(b)	20
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste stored to prevent groundwater degradation.	<input type="checkbox"/>	299.116(c)	21
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sufficient number of properly constructed storage containers.	<input type="checkbox"/>	299.121	22
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storage containers labeled properly.	<input type="checkbox"/>	299.121(d)	23
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storage container height and access requirements.	<input type="checkbox"/>	299.121(e)	24
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Storage tank design standards.	<input type="checkbox"/>	299.122	25
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Storage tanks labeled properly.	<input type="checkbox"/>	299.122(a)	26
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No putrescible waste or liquid waste stored in piles.	<input type="checkbox"/>	299.112(d), 299.131(b)	27
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste storage pile area properly designed, constructed and maintained.	<input type="checkbox"/>	299.131	28
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storage pad or liner system properly designed and maintained.	<input type="checkbox"/>	299.132	29
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper design and maintenance of leachate and runoff control systems.	<input type="checkbox"/>	299.133	30
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper storage and containment of incinerator ash residue.	<input type="checkbox"/>	299.151	31
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper storage and containment of friable asbestos containing waste.	<input type="checkbox"/>	299.152	32
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper storage and containment of coal ash.	<input type="checkbox"/>	299.153	33
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper storage and containment of PCB containing waste material.	<input type="checkbox"/>	299.154	34
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Proper storage of whole and processed tires.	<input type="checkbox"/>	299.155	35
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

Inspection ID _____

Field Code _____

INSPECTION REPORT INFECTIOUS OR CHEMOTHERAPEUTIC WASTE GENERATOR

Site I.D.: PAD046538211
Site Name: Lyondell Chemical Company
Address: 3801 West Chester Pike, Newtown Square, PA 19073

Telephone #: 610-359-4849

Operator Name: _____

Address: _____

Municipality: Newtown Township

Responsible Official: _____

Person Interviewed: Thomas BakerInspector: Melissa MenkevichInspection Date: 6/30/03eFACTS ID #: PF _____

SF _____

Comment: _____

County: Delaware

Title: _____

Title: Environmental SupervisorTitle: Waste Management Specialist# Violation: 0Inspection Date: 6/30/03 Type: routine Results: 0 violations Resolved: / /Permit Expiration Date: / / Days/Week Operated: _____ Max. Daily Volume: _____Infectious and chemotherapeutic waste generated: 5 to 20 pounds/month kg/month

1 - No Violation Observed 2 - Not-Applicable 3 - Not-Determined 4 - Non-Compliance

STATUS				REQUIREMENT	COMMENTS ATTACHED	CHAPTER CITATION	LINE ITEM
1	2	3	4				
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storage in compliance with §§ 284.401-284.419.	<input type="checkbox"/>	284.401	1
BASIC STORAGE							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Integrity of containers maintained, leakage and releases prevented.	<input type="checkbox"/>	284.411(a)(1)	2
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Spread of infectious agents prevented; vectors controlled.	<input type="checkbox"/>	284.411(a)(2),(3)	3
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Waste maintained in a nonputrescent state; odors prevented.	<input type="checkbox"/>	284.411(a)(4),(5)	4
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Unauthorized access to waste prevented; enclosures and containers secured.	<input type="checkbox"/>	284.411(a)(6)(i)	5
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enclosures or containers marked with prominent warning signs.	<input type="checkbox"/>	284.411(a)(6)(ii)	6
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Enclosures capable of being readily maintained in a sanitary condition.	<input type="checkbox"/>	284.411(b)	7
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste not commingled with other waste.	<input type="checkbox"/>	284.411(c)	8
SORTING							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste placed in separate containers from other waste at the point of origin.	<input type="checkbox"/>	284.412(a)	9
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste stored together in the same container only with Department approval.	<input type="checkbox"/>	284.412(b)	10
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste sorted properly according to class, and each class of waste placed in a separate container	<input type="checkbox"/>	284.412(d)(1)-(3) (e)(1)-(3)	11
DURATION OF STORAGE							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious waste stored for no longer than 30 days at room temperature.	<input type="checkbox"/>	284.413(a)(1),(2)	12
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious waste stored for no longer than 90 days in a freezer	<input type="checkbox"/>	284.413(a)(3)	13
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Putrescent infectious waste moved off-site within 24 hours	<input type="checkbox"/>	284.413(b)	14
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious waste sharps managed according to 284.411	<input type="checkbox"/>	284.413(c)	15

Site Name	Lyondell Chemical Company
ID Number	PAD046538211
Date	6/30/03

INSPECTION REPORT INFECTIOUS OR CHEMOTHERAPEUTIC WASTE GENERATOR (Cont'd)

1 - No Violation Observed 2-Not-Applicable 3-Not-Determined 4-Non-Compliance

STATUS				REQUIREMENT	COMMENTS ATTACHED	CHAPTER CITATION	LINE ITEM
1	2	3	4				
STORAGE CONTAINERS							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste stored in proper containers	<input type="checkbox"/>	284.415(a)(1)-(3)	16
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Used sharps stored in proper containers.	<input type="checkbox"/>	284.415(b)(1)-(3)	17
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Infectious and chemotherapeutic waste fluids stored in proper containers.	<input type="checkbox"/>	284.415(c)(1)(2)	18
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Double bagging employed when bags are the only storage container. Bags meet strength and certification requirements.	<input type="checkbox"/>	284.415(d)(1)-(4)	19
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yellow bags used for chemotherapeutic waste; red bags used for infectious waste.	<input type="checkbox"/>	284.415(d)(5)	20
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Protective clothing worn by persons packaging infectious or chemotherapeutic waste for offsite shipment.	<input type="checkbox"/>	284.415(f)	21
MARKING OF CONTAINERS							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Outermost container of infectious or chemotherapeutic waste for offsite transport labeled immediately with proper label.	<input type="checkbox"/>	284.416(a),(b)	22
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Outermost container of infectious or chemotherapeutic waste properly labeled with biohazard symbol and "infectious waste" or "chemotherapeutic waste."	<input type="checkbox"/>	284.416(c)	23
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Labeling information colored red for infectious waste, yellow for chemotherapeutic waste, with contrasting color backgrounds.	<input type="checkbox"/>	284.416(d)	24
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stationery containers lined with appropriately colored bag.	<input type="checkbox"/>	284.416(e)	25
REUSE OF CONTAINERS							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Nonrigid containers not reused.	<input type="checkbox"/>	284.417(a)	26
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Corrugated fiberboard containers reused only if container protected from waste.	<input type="checkbox"/>	284.417(b)	27
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Rigid, nonfiberboard containers reused only if container protected from waste or container has been decontaminated by approved means.	<input type="checkbox"/>	284.417(c)(1)(2)	28
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Rigid containers used to store chemotherapeutic waste reused only if container protected from waste.	<input type="checkbox"/>	284.417(d)	29
MANIFESTING							
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Manifest prepared as required.	<input type="checkbox"/>	284.712(a)-(e)	30
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Exception reporting conducted as required.	<input type="checkbox"/>	284.714(a)-(c)	31
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Manifest copies maintained for at least 5 years.	<input type="checkbox"/>	284.703(b)	32
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		

Commonwealth of Pennsylvania
Department of Environmental Protection
Bureau of Land Recycling & Waste Management

Inspection Report Comments

Date of Inspection June 30, 2003 Identification Number PAD046538211

Company/Facility/Site Lyondell Chemical Company

A routine inspection of the hazardous, residual, and infectious waste handling methods at Lyondell Chemical Company, located in Newtown Township, Delaware County, was conducted on June 30, 2003 by Melissa Menkevich, Waste Management Specialist, of the Department. Mr. Thomas Baker, Health, Safety, and Environmental Supervisor, was present for Lyondell.

A walk-around tour of the facility was lead by Mr. Baker. The Newtown Lyondell site is a Research and Development facility for their parent Lyondell chemical company. They are listed as a large quantity generator (LQG) of hazardous waste with EPA ID# PAD046538211. The facility's property is now owned by the software company SAP, and Lyondell leases from SAP. The Bayer Corporation (EPA ID# PAR000023994) is no longer operating at this site.

Hazardous waste is generated primarily in satellite accumulation containers from lab wastes from their R&D operation. Lyondell operates "bay" lab areas of their B and E buildings. B-Bay areas 1, 2, 3, 6, 7, and E-Bay areas 2, 3, and 4 were inspected. All hazardous waste satellite accumulation containers were properly labeled with Lyondell hazardous waste tags. These containers are primarily glass chemical bottles and jugs, and when they are full, they are dated and placed in the nearest satellite collection area, to again be collected (usually 3 times a week) by a member of the hazardous waste team to be consolidated into drums or labpacks, and placed in one of the main storage areas.

The main hazardous waste storage area outside of the B building was inspected. It was properly labeled and had proper containment. All drums and totes were labeled and dated correctly. The oldest drums were dated 5/15/03. Residual waste drums in this area were observed as well to be properly labeled, and Mr. Baker explained that the use of an in-house inventory system ensures that no residual waste is stored for over one (1) year. Onyx transports both hazardous and residual wastes from Lyondell several times a month.

The smaller storage area outside of the E building was observed. It was properly labeled and had proper containment. No waste was observed in this area.

This inspection report is notice of the findings of an inspection conducted by a representative of the Department. This report is formal notification of any violations observed during the inspection. Additional notification of violations may be issued concerning either violations noted herein, or other violations identified as a result of review of laboratory analyses or Department records.

This report does not constitute an order or other appealable action of the Department. Nothing contained herein shall be deemed to grant or imply immunity from legal action for any violation noted herein.

Signature by the person interviewed does not necessarily imply concurrence with the findings on this report, but does acknowledge that the person was shown the report or that a copy was left with the person.

Person interviewed (signature) Thomas Baker Date 7/1/03

Inspector (signature) Melissa Menkevich Date 7/1/03

Commonwealth of Pennsylvania
Department of Environmental Protection
Bureau of Land Recycling & Waste Management

Inspection Report Comments

Date of Inspection June 30, 2003 Identification Number PAD046538211

Company/Facility/Site Lyondell Chemical Company

Lyondell (and SAP) operates a residual wastewater treatment system for their industrial cooling water. This water is collected in ^{one} residual waste storage tank^{NON-contact}, allowed to fill and settle, and then discharged to the local POTW per discharge permit #202-D30 from DELCORA (effective July 19, 1999; expires July 18, 2004). Mr. Baker explained that usually only leaves and other debris settle from the water, but that this debris would be handled and shipped as residual waste. The discharged water is also considered residual waste, and is included on Lyondell's 2002 Residual Waste Biennial Report. The tanks for the water treatment system were not labeled. 25 PA Code 299.122(a) states, "a storage tank shall be clearly labeled as 'residual waste' and the type of residual waste shall be identified." A copy of the PADEP Residual Waste regulations will be given to Mr. Baker along with this report.

Infectious waste generated at the facility is from routine Lyondell employee drug tests. The infectious waste is primarily urine used for the drug analyses. The drug testing room was observed. One empty red infectious waste container was observed in the room. It was lined with a red bag and was properly labeled. Stericycle makes regularly scheduled visits to Lyondell and boxes up and transports offsite any infectious wastes present. Infectious waste manifests were reviewed from 2002 – present and found to be in compliance.

A paperwork review was conducted. The facility's PPC plan was last revised 4/29/03 and was found to be in compliance. The facility's 2001 Hazardous Waste Biennial Report and its 2002 Residual Waste Biennial Report were reviewed and were found to be in compliance. Weekly inspection logs of the hazardous waste storage areas, as well as Lyondell hazardous waste employee training records and Lyondell's Chemical Analysis Report (26R), were reviewed and also found to be in compliance. Hazardous and non-hazardous waste manifests were reviewed from 2002 – present and found to be in compliance. The most recent shipment was from 6/19/03.

Lyondell's source reduction strategy (25R) was reviewed but was not determined to be fully completed or up-to-date. The most recent data observed appeared to be from 1998. The source reduction strategy should be updated at least every five (5) years, so 2003 would be the fifth year. In order to ensure

This inspection report is notice of the findings of an inspection conducted by a representative of the Department. This report is formal notification of any violations observed during the inspection. Additional notification of violations may be issued concerning either violations noted herein, or other violations identified as a result of review of laboratory analyses or Department records.

This report does not constitute an order or other appealable action of the Department. Nothing contained herein shall be deemed to grant or imply immunity from legal action for any violation noted herein.

Signature by the person interviewed does not necessarily imply concurrence with the findings on this report, but does acknowledge that the person was shown the report or that a copy was left with the person.

Person interviewed (signature) Thomas P. Baker

Date 7/1/03

Inspector (signature) Melissa Markewich

Date 7/1/03

Commonwealth of Pennsylvania
Department of Environmental Protection
Bureau of Land Recycling & Waste Management

Inspection Report Comments

Date of Inspection June 30, 2003 Identification Number PAD046538211

Company/Facility/Site Lyondell Chemical Company

compliance, Lyondell should ensure that its source reduction strategy is updated in a timely fashion in accordance with 25 PA Code 262a.100.

No violations were noted.

Within fourteen (14) days of this receipt of this report, Lyondell should submit to the Department a plan and schedule for addressing the above concerns.

This inspection report is notice of the findings of an inspection conducted by a representative of the Department. This report is formal notification of any violations observed during the inspection. Additional notification of violations may be issued concerning either violations noted herein, or other violations identified as a result of review of laboratory analyses or Department records.

This report does not constitute an order or other appealable action of the Department. Nothing contained herein shall be deemed to grant or imply immunity from legal action for any violation noted herein.

Signature by the person interviewed does not necessarily imply concurrence with the findings on this report, but does acknowledge that the person was shown the report or that a copy was left with the person.

Person interviewed (signature) Thomas Baker Date 7/1/03

Inspector (signature) Melissa Menkeovich Date 7/1/03

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WASTE MANAGEMENT

INSPECTION REPORT COMMENTS

Company/Facility/Site Name: Lyondell (formerly Arco Chemical)
Identification Number: PAD046538211
Date of Inspection: 03/10/2000

On March 10, 2000, Andy Sinclair and I (Ben Williams) conducted a follow-up inspection of Lyondell located in Newtown Township, Delaware County. We were accompanied on the inspection by Bob Dockerty. The facility produces chemicals components that are utilized in the manufacture of other final items. This particular facility is research and development oriented and a large quantity generator of hazardous waste.

We inspected the main storage area located adjacent to the pouring room and the smaller storage area located adjacent to the pilot plant. The main storage area stores both waste and product and is covered by a roof. The smaller storage area is not covered by a roof and both of these storage areas had contained cracks in the existing concrete during the inspection dated September 8, 1999. We observed both storage areas had been coated with a grayish-green sealant. We observed no visible cracks in the storage areas. No violations were observed during the inspection.

In the "Requirement" Section of this inspection report, each listed inspection item may provide only a brief version of its corresponding obligation as described in the body of the regulations. Please use the Chapter citations listed on this inspection report as a reference to obtain a detailed description of compliance requirements.

This inspection report is official notification that a representative of the Department of Environmental Protection, Waste Management Program, inspected the above installation. The findings of this inspection are shown in this report. This inspection report shall serve a formal notification of any violations which were observed during the inspection. Violations may also be discovered upon examination of the results of laboratory analyses and review of Department records. Additional notification may be forthcoming, concerning any violations indicated herein and listing any additional violations.

This report does not constitute an order or other appealable action of the Department. Nothing contained herein shall be deemed to grant or imply immunity from legal action for any violation noted herein.

Signature by the person interviewed does not necessarily imply concurrence with the findings on this report, but does acknowledge that the person was shown the report or that a copy was left with the person.

Person Interviewed (Signature) _____ Date _____
Inspector Signature) Ben Williams Date 3-17-00
File name: lyondell3-10-00.doc Page 1 of 1

RCRA Compliance Evaluation Inspection

LYONDELL Worldwide Inc.

3801 Westchester Pike
Newtown Square, Pennsylvania 19073

Formerly known as:

ARCO Chemical Company

Telephone Number: 610-359-4604

Date of Inspection: September 8, 1999

RCRA Identification Number: PAD~~X~~046538211

SIC number: 2869

EPA Representative:

George H. Houghton
Environmental Protection
Specialist

State Representative:

Benjamin L. Williams
Solid Waste Specialist

Facility Representative:

Thomas Baker
Environmental superintendent

Robert Masine
Pilot Plant Superintendent

Howard Miller

BACKGROUND

At the request of the Chemical and Waste Management Division, the Facility inspection Program inspected Lyondell, a research and development activity, located in Newtown Square, Pennsylvania.

FACILITY DESCRIPTION

ARCO Chemical Company was a subsidiary of ARCO, the petroleum company, but formed its own independent company in the 1980s. In July 1998, ARCO Chemical Company merged with Lyondell whose headquarters is in Houston Texas. Headquarters staff, left over from ARCO are currently being transferred to Houston. This facility performs research and development on organic chemicals, principally propylene oxide including polyol and derivatives. The research progresses from laboratory experiments to small bench scale experiments to a pilot plant. Within this facility are over 100 analytical laboratories. The site covers about 10 acres. Current employment is about 400.

A portion of the property and one building was sold to SAP America. Reportedly, this company designs software. Their hazardous waste activities, if any, are independent of Lyondell and were not investigated as part of this inspection.

PERMIT STATUS

Lyondell is a large quantity generator storing for less than 90 days in containers. The facility does not have a RCRA Part B permit.

INSPECTION OBSERVATIONS

General

Lyondell has two storage pads for containers of hazardous waste, one is located near the Pilot Plant while the other is

called the 'large pad' or 'main pad'. Each lab that generates waste manages their waste using the satellite accumulation option. It is facility policy to label all waste as a hazardous waste until a final determination is made by the waste handlers. The waste is first transported to the 'pouring room' where this determination is made. The hazardous waste determination is made using the knowledge from the laboratory generator, ingredients are listed on the container, original container information, MSDS or a combination of these. Additionally, the TSD facility will periodically accomplish a waste analysis as part of the waste profile. Typically, all waste, whether hazardous or not, is disposed in the same manner, incineration. Waste from the labs is picked up on Monday, Wednesday and Fridays. The lab operator places their waste in pans located in the service corridor between the labs (see photo). Lab waste is packed in lab packs and shipped out monthly. The disposal contractor for the lab pack and drum quantity waste is AETS who was recently "bought out" by ONYX. Safety Kleen, used by the facility's maintenance department, disposes the waste from part cleaning. Bulk waste is managed by Clean Harbors.

Satellite

The inspector observed 10 of the labs for compliance with the regulations. In one laboratory (room D2151) a container was observed that was labeled mercury (see photo). It was open at the top with a funnel placed in the opening and held an estimated 10 to 20 ML of waste mercury (see photo). The waste stored in the remaining laboratories appeared to be correctly managed.

In addition to the laboratories, waste is generated at the pilot plant also known as E-Bay 1. One 55 gallon container labeled acetone wash was observed (see photo). This container was open at the large bung hole with a funnel in it. Laying inside the funnel was a pail liner that was placed there for

draining. The inspector observed that this liner was dry. The small bung hole was also open. The container was adequately labeled. Another 55 gallon container was labeled a hazardous waste but the contents labeling was confusing. It was labeled as acetone, IPA (isopropyl alcohol), VAZO (cas #13472-08-7) to be decomposed and hazardous waste. According to this building's representative, Tom Mcaleer, the drum contained an IPA and water mixture.

Less than 90 day storage

One of the storage areas is termed the "small pad" by facility personnel for waste that originates from the pilot plant. It is also known as the 'E-pad'. Waste accumulated in this area originates from the pilot plant (E-Bay). The waste is removed daily to the main less than 90 day storage area. Inspections are weekly and documented. A sump is available to capture spills and rain water. According to the facility, the sump water is either discharged to DELCORA, if found to be contaminated, or to the surface waters if not contaminated. Containers in this area were properly managed. The floor of the containment area was found to have hair line cracks.

The main storage pad is equipped with a berm for spill containment and a canopy for weather protection. The bermed area leads to a sump whose valve is normally closed. Accumulated water is discharged to the facility's WWTP. If the liquid in the sump resulted from a spill or is otherwise contaminated, it is tested and handled accordingly. A spill pan (see photo) is used to stage smaller quantity incoming waste before placement in hazardous material storage cabinets. These containers were first sorted at the pouring room. Eventually this waste will be packed for shipment as lab-packs. This inspector observed that two one gallon containers were not dated, otherwise, all the observed containers appeared to be properly stored. All the drums observed also appeared to be properly stored, although, some of the labels were obscured by

other drums. Inspections were adequate and are documented weekly. Some cracks were noted in the floor of the storage area (see photo).

Subsequent to this inspection, Mr. Baker informed this inspector that a coating would be applied to both the main pad and the E-pad floor to seal the cracks (letter attached).

Pouring area

Waste from the laboratories is brought to this area and its hazardous classification is determined as mentioned earlier. Some of the waste is transferred to the main storage area for lab packing. Like wastes, that can be bulked, are poured into larger containers, usually 55 gallon drums, for ease of shipment. The one drum of bulked waste, observed by this inspector, was closed and dated. During the pouring operation a suction air vent is used to minimize the workers exposure of vapors. This vent discharges directly to the atmosphere and, according to the facility representative, has no air pollution control equipment.

Subpart cc

According to Mr. Baker, the facility has evaluated its waste through knowledge of the waste streams. Their method of complying with the cc regulations is to place all waste in DOT approved containers while the waste is stored in the <90 day storage site.